

ULTRASONIC APPLICATION DATA SHEET

Please fax or e-mail back to FLO-CORP Fax: (330) 331-7172 | E-mail: sales@flo-corp.com

CUSTOMER INFORMATION							
Contact				Prep	ared By		
Company				Date			
Address				Note	es on the A	pplication	
City		State		1			
Zip/Postal Code		Phone		1			
E-mail		Fax]			
VESSEL INFO	RMATION	(Supply s	ketch when possible)		Sket	ch attached	Photo of mounting position available?
Vertica Tank	Horizonta	I Tank	Conical E Tan			Open Tank	IBC Liquid Tote
UPPER SWITCHING (IF APPLICABLE) LOWER SWITCHING (IF APPLICABLE) 			2.6" (143mm) (66mm)			1.5" NPT-F FLANGE OR COU REQUIRED DEAD SPACE OF 2. MEASURE FRON OF SENSO HIGHEST SO LEVEL IN NOTE: CANN LESS THAN	BAND 5" A BOTTOM R TO "" LUTION ANK "" JUTION "" IZ:5" "

