

# INCONEL

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## CUSTOMERS APPLICATION DATA SHEET

Name & Designation : .....

Company : .....

Address : .....

.....

.....Country.....

Telephone : ..... Fax .....

E-mail : .....

Application Name of fluid : .....

**IMPORTANT** : PLEASE FURNISH PUMP / COMPRESSOR / BLOWER DETAILS WHICH IS BEING USED  
FOR PRESSURISING THE FLUID. PLEASE FURNISH SUCTION SIZE, DELIVERY SIZE & RATED  
PRESSURE.

Pipe Line Size : .....

Flow Range : ..... Min .....operating..... Max

Operating Pressure : ..... Min .....operating..... Max

Operating Temperature : ..... Min .....operating..... Max

Viscosity in cst : .....at operating Temperature

Specific Gravity : .....

Other relevant application details like Source of Fluid to Destination of Fluid, Purpose of Flow  
Measurement, your process details & exact requirement. This will help us in offering you the best  
Flowmeter solution for your Application. : .....

Remarks .....

Please mail or fax duly filled in data sheet to us for application scrutiny & flow meter sizing