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| **APPLICATION DATA SHEET: STATIC (BIN) WEIGHING** |

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|  |
| **Quote Reference:** |       |  | **Tag:** |       |  |
| **Customer:** |       |  | **End-User:** |       |  |
| **Fax No:** |       |  | **Date:** |       |  |
|  |
| In order to evaluate the application *and* to ensure that any equipment subsequently purchased will be compatible with the process plant, certain minimum data is required. Please enter the data required on the questionnaire below.A free hand sketch of the plant/equipment/supports etc., should be drawn on the reverse of this data sheet. |
| **PROCESS AND MEASUREMENT DETAILS** |
| **VESSEL DATA** |
|  | **Maximum** | **Normal** | **Minimum** |
| Bin tare mass (kg) |  |  |       |  |  |
| Bin gross mass (kg) |       |  |       |  |       |
|  |
| **PROCESS DATA** |
|  | **Maximum** | **Normal** | **Minimum** |
| Ambient temperature (°C) |       |  |       |  |       |
| Process temperature (°C) |       |  |       |  |       |
| Process material nett mass (kg) |       |  |       |  |       |
| Bulk Density of process material (kg/m3) |       |  |       |  |       |
| Process material |  |  |       |  |  |
| Application (Mark choice (🗶) & enter accuracy required)? |
|  | [ ]  | Level (Accuracy required >1%) | Accuracy |       | % |
|  | [ ]  | Weighing (Accuracy required <1%) | Accuracy |       | % |
|  | [ ]  | Custody Transfer/Certified |
| Hazardous location? | [ ]  Yes [ ]  No |  |       | (Classification) |
| Severe vibration? | [ ]  Yes [ ]  No | (Mark Choice) |  |
|  |
|  |
| **CALIBRATION METHOD** |
|  |
| [ ]  Theoretical [ ]  Material Test [ ]  Assised Test Mass Pieces (Mark preferred method(s)) |
|  |
|  |
| **ELECTRONIC TRANSMITTER** |
|  |
| Cabinet type | [ ]  Blind [ ]  Wall Mounting | (Mark Choice) |
| Power supply available | [ ]  220V AC [ ]  110V AC [ ]  50 Hz [ ]  60 Hz | (Mark Choice) |
| Environmental temperature (°C) |       | (Maximum) |       | (Normal) |       | (Minimum) |
| Enclosure protection class | [ ]  IP54 (std) [ ]  IP55 [ ]  IP  |       |  | (Mark Choice) |
|  |  |  |  |  |
| Severe vibration? | [ ]  Yes [ ]  No | (Mark Choice) |
| Hazardous location? | [ ]  Yes [ ]  No |       | (Classification) |
| Local display required? | [ ]  Yes [ ]  No | (Mark Choice) |
| Remote display required? | [ ]  Yes [ ]  No | (Mark Choice) |
|  |  |
|  |
| **TRANSMITTER OPTIONS** |
|  |
| Output signals required? | [ ]  4-20 mA [ ]  Other |       |  |
|  |  |  |  |
| Field bus options required? |       |  |
| LCD back lighting required? | [ ]  Yes [ ]  No | (Mark Choice) |
| High / Low alarms required? | [ ]  Yes [ ]  No | (Mark Choice) |
| EMI Filtering Constant Voltage Transformer required? | [ ]  Yes [ ]  No | (Mark Choice) |
| Inter-connecting cable required? | [ ]  Yes [ ]  No |  |       Metres |  |
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| **LOAD CELL OPTIONS** |
|  |
| Number of load cells preferred |       | (Specify) |
|  |
| Mounting hardware required? | [ ]  Yes [ ]  No |
|  |
| **SPECIAL REQUIREMENTS** |
|  |
|  |       |  |
|  |       |  |
|  |       |  |
|  |       |  |
|  |
|  |
| **SKETCH OF VESSEL** (Side View) |
| **or alternatively** attach a drawing (ACAD .dwg or .pdf format) of the vessel |
|       |
|  |
|  |
| **CONFIRMATION OF TECHNICAL DETAILS AS SET OUT ABOVE** |
|  |
| Print Name: |       |  | Designation: |       |  |
| Signature: |       |  | Date: |       |  |
|  |
|  |
| **FOR OFFICE USE** |
|  |
| Transmitter Model to be supplied: |       |  |
| Load cell model to be supplied: |       |  |
| Load cell capacity to be supplied: |       |  |
| Options to be supplied: |       |  |
| Additional requirements: |       |  |
|  |       |  |
|  |       |  |
|  |