



APPLICATION FORM

On-line Water Sampler

Customer _____

City _____ **Country** _____

Contact _____

Tel _____ **Fax** _____

E-mail _____

Date _____

Type of Application WWTP P&P Other _____
 New Replacement

Replaces, Type & Brand _____

General Information

Description _____

Position _____

Media _____

Chemicals _____

Gases _____

Temperature	Media	Min	°C	Ma	°C
			-----	x	-----
	Ambient	Min	°C	Ma	°C
			-----	x	-----

Means of Control Time Pulse mA

Suction Height _____ m Hose Length _____ m

Hose Positioning (sketch)

Signature _____