

Advanced Sensor Technologies, Inc.

603 North Poplar Street, Orange CA 92868-1011 USA TEL: 714-978-2837 FAX: 714-978-6339
TOLL FREE: 888-WOW-ASTI (888-969-2784)

Iotron™ Process Ion Selective Equipment Application Questionnaire

Company: Name and Address: _____

Contact Person: Name, Phone & Fax Number, E-mail address: _____

Sample Information:

Description: _____

Major Constituents & Concentrations: _____

Solvent Contents: _____

Particulates Content: _____

Viscosity: _____ Max. Pressure: _____

Temperature: _____ Flow Rate: _____

Target Ion & Concentration Range: _____

Expected Fluctuation Range: _____

Process Instrumentation:

Make & Model Number: _____

Distance to Sensor: _____ Preamplifier Used: _____

Other Related Equipment (i.e. pumps, controllers, pid's, recorders): _____

System Diagram: Please attach a sketch of sensor installation and overall process setup.

Sensor Information:

Make & Model Number: _____

Type (Solid State, Glass, Organic): _____ Cable Length: _____

Configuration: _____ Orientation: _____

Current Lifetime: _____ Desired Lifetime: _____

Failure Mechanism: _____

Frequency of Cleaning: _____ Cleaning Process: _____

Frequency of Calibration: _____ Desired Frequency: _____

Calibration Solution Concentrations: _____

Desired features not available with currently used sensor: _____

Comments: _____