

Email to: admin@measurement-resources.com.au or
 Fax to: (02) 9816 3806

100 SERIES SELF POWERED CONTENTS GAUGE QUESTIONNAIRE

PLEASE TICK OR FILL BOXES AS REQUIRED

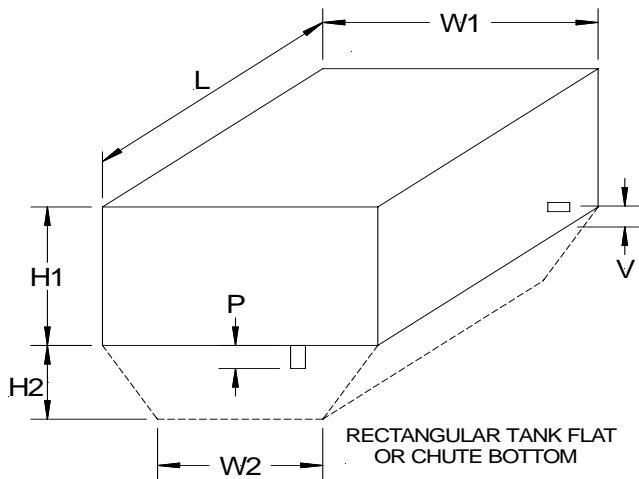
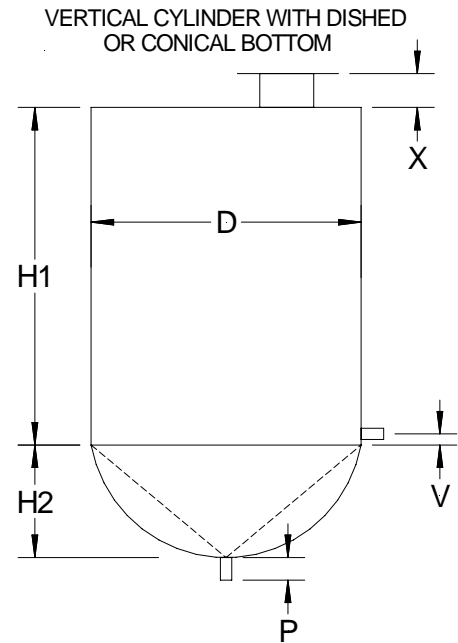
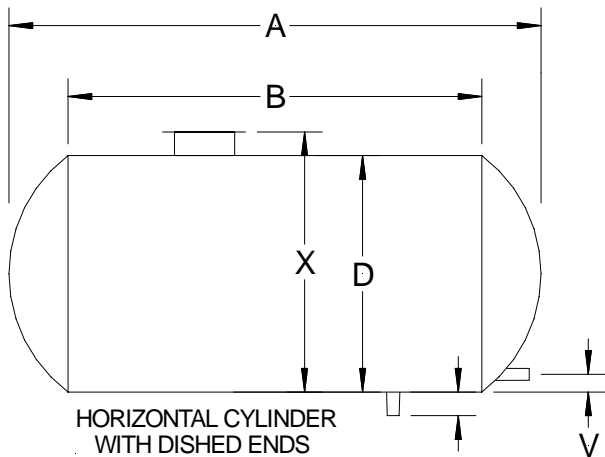
Name: _____ Order Number: _____
 Address: _____ Drawing Number: _____
 _____ (Please supply drawings or sketch whenever possible)

Liquid in the Tank: _____
 Temperature of Liquid: _____
 Specific Gravity: _____

INDICATOR SCALE – CALIBRATION – VOLUME/ MASS/ HEAD UNITS

LITRES: KGS: METRES HEAD Or OTHER:

100 Series ORDER CODE (Refer to 100 Series Self Powered Contents Gauge Leaflet)
 COMPLETE TO SPECIFY MODEL REQUIRED:



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