

Data Required for Gas Odorizer Quotation

Company name: _____

Company address: _____

Contact person: _____

Contact phone: _____ Fax: _____

Station name or number: _____

Gas Flow Input Signal (corrected):

Analog: 4-20 mA 1-5 VDC

Pulse: 1 pulse equals _____ cubic feet

Maximum hourly flow (scfh) _____

Average hourly flow (scfh) _____

Minimum hourly flow (scfh) _____

Odorant:

Odorant type _____

Manufacturer _____

Odorization rate (lbs/MMscf) _____

Tank: Size (Gallons) _____

Skid and containment pan

Electronic level transmitter

Dual Wall Tank

Manual Tank Level

Pipeline Conditions:

Upstream pressure (PSIA):

Min _____ Avg _____ Max _____

Downstream pressure (PSIA):

Min _____ Avg _____ Max _____

Gas temperature (F):

Min _____ Avg _____ Max _____

Controller Options:

B/U: Keypad/Touchscreen local interface, 5 alarms, optional level, optional temperature

A/T: Above plus modbus, data logging/history, alarm logs, touch screen local interface,

Remote Communication Options:

Modem

Cellular Modem

Blue Tooth

Radio

Other: Specify _____

Alarm output setup: 24 VDC Dry Contact

Other digital outputs: _____

Voltage source: 120 VAC 24 VDC
 Solar _____ Other

Explosion-proof enclosure for Class 1 Div. 1
(System is rated Class 1 Div. 2 without enclosure)

Case heater: Lowest Temperature (F) _____

Odorizer to pipeline connection:

1/2" 3/4" 1" _____ Other



13839 West Belfort
Sugar Land, TX 77498
Phone: 281-491-3409
Fax: 281-491-8344
1-877-ODORIZE