

Please refer to the model code listings in your **HYDAC Electronics catalog #02075078** or on our website to plan your selections.

Name _____ Title _____
 Company _____ E-mail _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____

Please attach any special requirements or drawings to the fax or e-mail.

HYDAC Pressure Transducer Models

- | | | |
|---|-----------------------------------|--|
| <input type="checkbox"/> EDS 410 | <input type="checkbox"/> EDS 710 | <input type="checkbox"/> EDS 300 |
| <input type="checkbox"/> EDS 410 Programmable | <input type="checkbox"/> EDS 3000 | <input type="checkbox"/> EDS 300 Ship/Offshore |
| <input type="checkbox"/> EDS 505 | <input type="checkbox"/> EDS 601 | <input type="checkbox"/> EDS 1700 |

Performance

- | | | |
|-------------------------|--|--|
| Switch Logic | <input type="checkbox"/> Normally Open | <input type="checkbox"/> Normally Closed |
| Switchpoint Function | Setpoint _____ | Hysteresis _____ |
| Window Function | High Setting _____ | Low Setting _____ |
| Switch Pressure Range | <input type="checkbox"/> psig (gauge) | <input type="checkbox"/> psia (absolute) |
| Maximum System Pressure | _____ | Nominal System Pressure _____ |
| Pressure Spikes | pressure amplitude _____ | duration _____ |
| Desired Accuracy | _____ ± % FSO | |
| Resolution | _____ psi or % FSO | |
| Dynamic Response | _____ Hz or msec | |

Type of application Industrial Mobile Laboratory Other _____
 Application Description _____

Environment *(check all that apply)*

- Pressure Media (type of fluid): _____
- | | | | | |
|------------------|--|-----------------------------------|---------------------------------|------------------------------|
| Safety Type: | <input type="checkbox"/> IP 65 | <input type="checkbox"/> IP 67 | <input type="checkbox"/> IP 69 | |
| Vibration/Shock: | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> | <input type="checkbox"/> |
| Shock: | <input type="checkbox"/> Low | <input type="checkbox"/> Medium | <input type="checkbox"/> High | <input type="checkbox"/> N/A |
| EMI: | <input type="checkbox"/> Light | <input type="checkbox"/> Moderate | <input type="checkbox"/> Severe | <input type="checkbox"/> N/A |
| Humidity: | <input type="checkbox"/> Normal | <input type="checkbox"/> High | | <input type="checkbox"/> N/A |
| Temperature: | of Fluid: <input type="checkbox"/> Minimum <input type="checkbox"/> Maximum | | | Cycle Life Required _____ |
| | of Surroundings: <input type="checkbox"/> Minimum <input type="checkbox"/> Maximum | | | Cycle Frequency _____ |

Electrical

- Input (excitation): DC Voltage _____
- Type of Output: Transister Relay Required Output - Amps _____
- Connection: M18 4-pole plug M12 4-pole plug DIN 43650/ISO 4400 plug
 Flying Lead (*cable type & length*) _____ 1/2" NPT Conduit (*lead length*) _____
 Other _____

Physical

- Pressure Port Mechanical Connection:
- | | | | | |
|--------------------------------|---------------------------------------|---------------------------------------|----------------------------------|--------------------------------------|
| <input type="checkbox"/> Male | <input type="checkbox"/> Female | | | |
| <input type="checkbox"/> G 1/4 | <input type="checkbox"/> SAE-6 (9/16) | <input type="checkbox"/> SAE-4 (7/16) | <input type="checkbox"/> 1/4 NPT | <input type="checkbox"/> Other _____ |

Required Quantity

Annual Usage _____ Target Price _____ Competitor _____
 Test Sample Required _____ Quantity _____