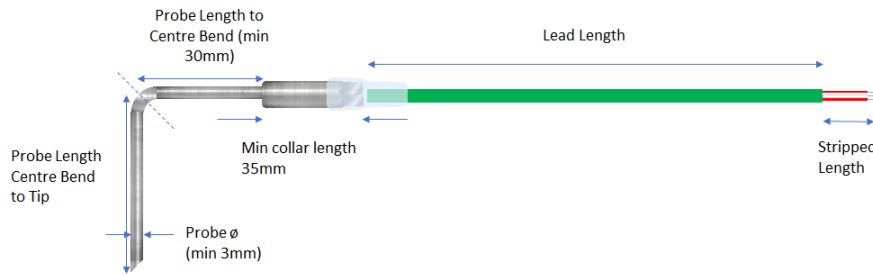


Please download PDF and fill in the boxes. Return form to sales@thermal-detection.com or fax to +44 1642 618307

Name: _____ Email: _____
 Organisation: _____ Tel: _____
 Country _____

Section 1 - unit dimensions (in mm)



Section 2 - Sensor Configuration

Sensor Number
 Single
 Duplex
 Triplex

Type T Thermocouple Only

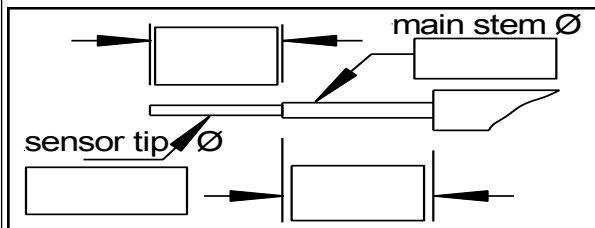
Hot Junction
 G Grounded
 s Insulated

PT100 Only

Type	Wires
Class 'A'	2 wire
Class 'AA'	3 wire
1/10 DIN	4 wire

Section 3 - Optional Features (in mm)

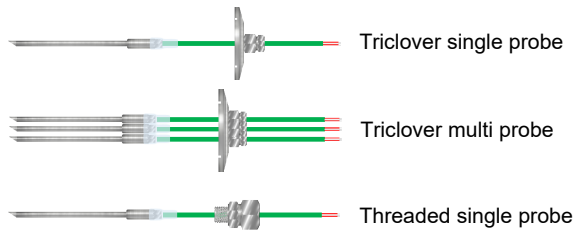
Reduced Probe Tip



Chisel Pointed Tip



Section 4 - Mounting Options



Tri-clover size / thread type and size?

Section 4 - Application Details

Number of probes required _____ Additional information _____
 Make of Autoclave _____
 Industry Type _____