



APPLICATION DATA

PLEASE CONTACT MPL FOR ASSISTANCE WITH APPLICATION DATA...SIGN AND DATE FORM...AND FAX TO (954) 973-6339.

Print Name _____ Title _____
 Company _____ Address _____
 City/St/Zip _____ E-mail _____
 Telephone _____ Fax _____
 Signature *[Required for processing]* _____ Date _____

Application: _____
[Please describe task the switch will perform. Example: "Monitor pressure across engine air filter. Turn on indicator lamp."]

Electrical: Load: Volts _____ Watts _____ Amps _____ Hertz _____
 Current: AC DC Circuit: Inductive Resistive Switch Form: SPST SPDT
Note: Max Amps: 500 Series/10-20mA; 600 Series/0.1-25A; 9300 Series/5A resistive, 2.5A inductive

Environment: Medium: _____ Contaminants Present: _____
 Temperature: Operating: Highest _____ Lowest _____ Storage: High Low
 Orientation of diaphragm: vertical horizontal Pressure input pulsation? Yes No

Pressure: Switch Type: Pressure Vacuum Differential Set Point (show units: psi, in/Hg, etc.) _____
 Set For: Actuate Deactuate Type of port / fitting required: _____
 Pressure Specifications: Operating (Normal) _____ Proof _____ Burst _____
 Actuation range (deadband, on-to-off spread) desired? _____ Normally: Open Closed

Approvals: Company: Component Environment Life Cycle Other (Describe) _____
 Agency: UL CSA AGA Other (Describe) _____

Production: No. of Samples Required: _____ Estimated Annual Volume _____ Target Price _____
 Recommended MPL PN _____ Switch PN Used Now _____

THIS SECTION TO BE COMPLETED BY MPL
 Order No. _____ Ship Date: _____ Ship Via: _____
 Cust.ID No. _____ Cust. PN _____
 Comment: _____