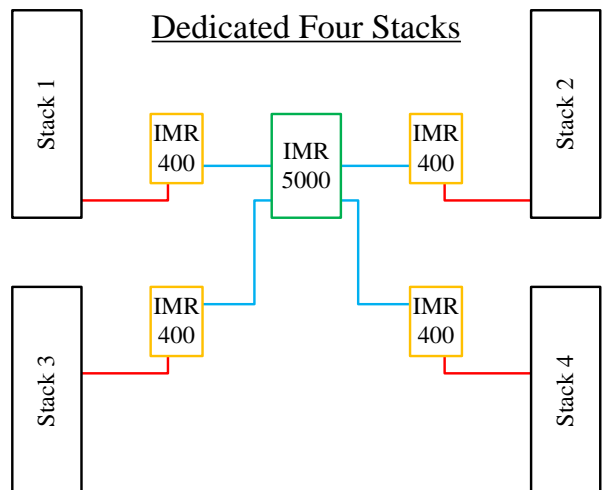
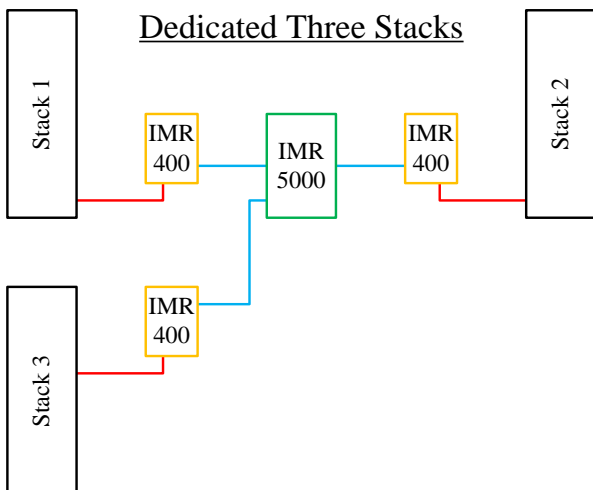
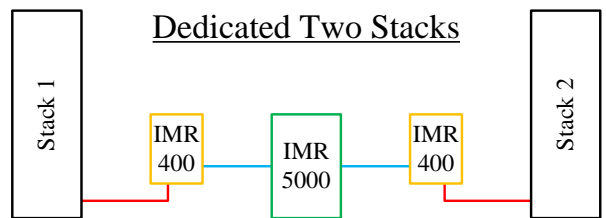
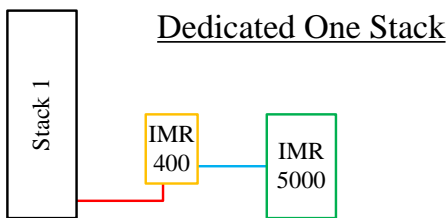
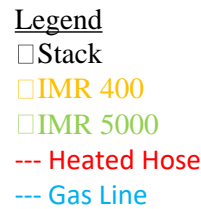
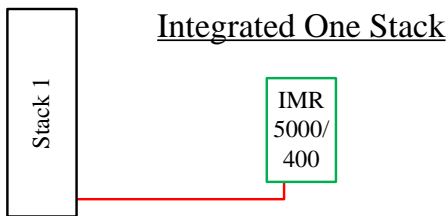




CEMS Questionnaire

Continuous Emission Monitoring System (CEMS)

- 1) Request Quotation Order Specification
2) Housing: Nema4 / IP64 19" Rack Other:
3) Configuration (Pick one):
One Stack Integrated (Permeation Dryer Only) IMR 400/5000 IMR 400 IMR 5000
Dedicated
Two Stacks Dedicated IMR 400 (2x) IMR 5000
Three Stacks Dedicated IMR 400 (3x) IMR 5000
Four Stacks Dedicated IMR 400 (4x) IMR 5000





CEMS Questionnaire

IMR 400

- 2) Integrated Gas Conditioning System: Permeation Dryer (Only)
- Dedicated Gas Conditioning System: Permeation Dryer Peltier Dryer

3) Heated Sample Line length:

- 1.5m 2m 3m 5m 10m Other Length: _____m

4) Gas Sample Probe length (Includes Filter & 100mm Flange):

- 250mm 500mm 750mm 1000mm 1500mm Other Length: _____mm

- 5) Site Power Supply: 110V/60Hz 220V/50Hz 24VDC

IMR 5000

6) Data Transfer:

- RS232 (Modbus RTU) RS422/485 (Modbus RTU)
- Ethernet (Modbus TCP/IP) 4 - 20mA
- USB Wireless

Other Method: _____

- 7) Printer: Yes No

- 8) Data Storage: Yes No

- 9) Gas Flow Meter: Yes No

- 10) Stack Gas Pressure (Draft) hPa _____ Velocity

- 11) Pitot Tube: 250mm 500mm 750mm Other Length: _____

- 12) Dust Particulate Monitor Opacity Monitor

- 13) Flow Basic High Sensitivity
 - Velocity
 - Volume flow
 - Differential pressure
 - Temperature



CEMS Questionnaire

14) Gas Analyzing System

Sensor	Max Range	UOM	Sensor	Max Range	UOM
<input type="checkbox"/> O2	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3	<input type="checkbox"/> CH4	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3
<input type="checkbox"/> CO	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3	<input type="checkbox"/> CO2	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3
<input type="checkbox"/> NO	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3	<input type="checkbox"/> O3	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3
<input type="checkbox"/> NO2	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3	<input type="checkbox"/> H2	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3
<input type="checkbox"/> NOx	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3	<input type="checkbox"/> HCL	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3
<input type="checkbox"/> SO2	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3	<input type="checkbox"/> CL2	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3
<input type="checkbox"/> H2S	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3	<input type="checkbox"/> Other: _____	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3
<input type="checkbox"/> HC	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3	<input type="checkbox"/> Other: _____	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3
<input type="checkbox"/> N2O	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3	<input type="checkbox"/> Other: _____	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3
<input type="checkbox"/> NH3	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3	<input type="checkbox"/> Other: _____	_____	<input type="checkbox"/> % <input type="checkbox"/> ppm <input type="checkbox"/> mg/Nm3
<input type="checkbox"/> T/C Flue Gas	_____	<input type="checkbox"/> °C <input type="checkbox"/> °F	<input type="checkbox"/> T/C Ambient Air	_____	<input type="checkbox"/> °C <input type="checkbox"/> °F

15) Calculated: CO2 Excess Air / Lambda Efficiency / Loss



CEMS Questionnaire

Special Requirements:

Five horizontal lines for special requirements.

Describe:

Five horizontal lines for description.

Company: _____
Address: _____

Phone: _____
E-mail: _____

Name: _____
City: _____
State: _____
Country: _____
Fax: _____