DATE:	
TO:	
COMPANY:	
FAX:	
TEL:	
PAGE(S):	
email:	



Analytical Instruments

A Teledyne Technologies Company

16830 CHESTNUT STREET, CITY OF INDUSTRY, CA 91748-1020 Tel (626) 961-9221 Fax (626) 961-2538 P.O. BOX 1580, CITY OF INDUSTRY, CA 91749-1580

WEB SITE: www.teledyne-ai.com

TC Analyzer Evaluation Questionnaire

In order identify the cause of failure; it is important full details of the application be provided with this questionnaire

The information requested below is important and needed to properly evaluate the instrument's problem. Please complete the following questionnaire and return the information to Technical Support:

Model Number:		Serial Number:	
Describe the failure symptoms:			
Gas Measured:			
Range of Analysis:			
Background Gas:			
Sealed reference:	Yes / No, if yes	Gas flow rate :	
Ambient Temperature:			
Temperature Variations:			
Sample Temperature:			
Sample Pressure:			
Sample/span/zero gas flow rates:			
How much is the drift?			
If this is the complaint,			
please attach records if available.			
Additional Comments:			

Thank you, Customer Service

Email: ask tai@teledyne.com