



ALPHA SPECTRA, INC.
SCINTILLATION DETECTORS

Request for Quotation and Detector Design Form

Please complete this form as best you can. If you need assistance call us at 800-2341-2545.

CONTACT INFORMATION

Name _____ Company/Institution _____
Address _____ Phone _____
Phone (mobile) _____
Email Address _____ Fax _____

APPLICATION

Describe how the detector will be used. (Supplying a sketch or drawing is helpful)

Reference model number for previous orders (See our [nomenclature](#) for model numbers)

RADIATION TYPE TO BE DETECTED (Circle One)

Photons: X-ray Gamma Energy range of interest from _____ to _____
Particles: Alpha Beta Protons Neutrons High Energy Other _____

SCINTILLATOR PROPERTIES AND PHYSICAL CONSTRAINTS

Scintillator Material _____

Scintillator Dimensions: Cylindrical ___ in. dia. x ___ in. or Rectilinear ___ in. x ___ in. x ___ in.

DETECTOR PACKAGE

Laboratory use _____ Outdoor Use _____
Environmental issues ? Temperature _____ Shock/Vibration _____
Magnetic Fields _____ Radiation _____
Housing Material Preferred: Aluminum _____ Stainless Steel _____
Energy entrance window face dimensions: _____ in. x _____ in.
Low energy window: Thin window required? Yes ___ No ___ Material: Beryllium ___ Aluminum ___

PHOTOSENSITIVE DEVICE

Photomultiplier Tube _____ Size Preferred _____ Timing _____ Other Constraints _____
Photodiode _____ Other _____

ELECTRONICS

Voltage Divider _____ Preamp _____ Other _____
Do you have any specific concerns about the detector being designed? _____

QUOTE INFORMATION

Quote Required by _____ Quantity Required _____
Delivery Required by _____

Please submit [electronically](#) or by fax to 970-244-6947. We appreciate your business.