

Order Details	Date :
<p><u>Note:</u></p> <p>Technical data as detailed below is required to complete configuration of controller.</p> <p>Failure may result with a delay on delivery or incorrect functionality.</p>	Company :
	Tel. No.:
	Quotation No.:
	Customer Reference.:
	Order No.:
	Contact name:
	Project name / No:
	Requested delivery date:
	Delivery address :

Controller Supply	Supply=.....volts Phase=..... Neutral Available = <input type="checkbox"/> yes <input type="checkbox"/> no
Pump Motor data	Manufacturer Model
	Max. starting current= amps KW = HP=
	Full load running current= amps Fan control required? <input type="checkbox"/> yes <input type="checkbox"/> no
	Fan supply: Volts= Amps= Phase=
Start	Star / Delta <input type="checkbox"/> yes <input type="checkbox"/> no Direct on line <input type="checkbox"/> yes <input type="checkbox"/> no
Valve Unit	Manufacturer Model
	No. of valves Valve voltage volts <input type="checkbox"/> AC <input type="checkbox"/> DC
	Cooler fitted? <input type="checkbox"/> yes <input type="checkbox"/> no Cooler supply volts Amps phase
	Tank heater fitter? <input type="checkbox"/> yes <input type="checkbox"/> no Heater supply volts Amps phase

Control	Number of stops= Maximum of Eight stops																																										
	Speed= m/s Travel= m																																										
	No. of car entrances= Simplex <input type="checkbox"/> Duplex <input type="checkbox"/> Triplex <input type="checkbox"/>																																										
	Please complete the table with floor markings at front & rear (where applicable)																																										
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">Front</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>Rear</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	Front																					Rear																				
Front																																											
Rear																																											
	Please Identify any short floors with mm (where applicable)																																										
	Full collective <input type="checkbox"/> Down collective <input type="checkbox"/> Non selective collective <input type="checkbox"/>																																										
	APB <input type="checkbox"/> Call /Send <input type="checkbox"/>																																										
Landing Push Riser	Cable with EN-81 Nodes including call beeper for Landing calls supplied <input type="checkbox"/> yes																																										
Note :	If the total number of landing calls exceed 4 - A Landing Push Riser must be supplied e.g. 4 Stop Full collective, 5 Stop Non Selective Collective, 5 Stop Down Collective																																										
Door operator	Power car & landing <input type="checkbox"/> Manual car / landing <input type="checkbox"/> Power car / swing landing <input type="checkbox"/>																																										
	Manufacturer Type Operating voltage volts																																										
	Retiring ramp= volts AC <input type="checkbox"/> DC <input type="checkbox"/> Power= Watts																																										
	Door coupler=volts AC <input type="checkbox"/> DC <input type="checkbox"/> Power= Watts																																										
	Door nudging <input type="checkbox"/> yes																																										
	Advance door opening <input type="checkbox"/> yes Zone locking <input type="checkbox"/> yes																																										
Indicators By Lifteknik	Car <input type="checkbox"/> yes Landing <input type="checkbox"/> yes Red Dot Matrix <input type="checkbox"/> yes Blue LCD <input type="checkbox"/> yes																																										
	Indicator Kits <input type="checkbox"/> yes Surface mount Stainless Steel <input type="checkbox"/> yes																																										
Indicators By Others	Make Model Voltage																																										
Please provide any other information:- Hall lanterns, Direction Arrows, all floors. Binary, Gray code, Signal per floor e.t.c																																											
Extra	Tapehead Required <input type="checkbox"/> Speech Synthesiser Required: <input type="checkbox"/>																																										
Other Information																																											