



Estimate Request Form

CONTACT INFORMATION

Name:

Date:

E-Mail:

Cell:

Company:

Office:

Company PO:

PROJECT INFORMATION

Project Name:

Car ID(s):

Project Address:

Billing Address:

Shipping Address:

Building Type:

If Other:

ELEVATOR INFORMATION

Elevator Type:

Capacity:

Speed:

Rail Size:

Car Sling Manufacturer:

Year Installed:

Overhead/Pit Height/Total Rise:

Crosshead/Safety Plank Gauge:

Width:

Steel Type:

Roller Guide/Slide Make:

Model:

Year Installed:

Has the elevator been balanced?

Have the guide rails/joints been verified for alignment & smoothness?

Is a 120 AC voltage connection present and fused? Stand-alone circuit recommended.

Is any special documentation required?

CONTROLLER INFORMATION

Existing Controller Make:

Model:

Year Installed:

Is existing controller equipped with Unintended/Ascending software?

If yes, please confirm output voltage from controller to HydraSafe Brake:

Does the existing controller have 24VDC UPS back up?

PLUS UNIT

Is a Plus Unit required? Holds separate controls with Unintended/Ascending software.

HYDRAULIC ELEVATOR INFORMATION

Cylinder Type:

Crosshead Size:

Bolster Channel:

Is the cylinder pre-1972?

Hoistway Height:

Pit:

Landings:

Overhead:

PLEASE INCLUDE ANY PHOTOS AVAILABLE

X

Printed name

X

Signature

The Only Choice When an Unintended/Ascending Movement Device is Required