



Company	Contact
Address	Department
Telephone	Extension
Fax	Email

1. Description of application:

2. Specific properties and requirements:

3. Environmental conditions:

4. Position of axis and guiding system (please mark with a cross)

- | | |
|---------------------------------------|---------------------------------------------------------|
| <input type="radio"/> Horizontal axis | <input type="radio"/> Guiding system existing |
| <input type="radio"/> Vertical axis | <input type="radio"/> Guiding system not provided |
| <input type="radio"/> Inclined axis | <input type="radio"/> Guiding system not yet determined |

5. Quantities

Annual quantity: _____ Delivery quantity: _____

Delivery time requested: _____

6. Technical data

Minimum installation height (in jacked-in position)	_____ mm	Maximum installation height (in extended position)	_____ mm
Stroke	_____ mm	Positioning accuracy	_____ mm
Mass to be moved	_____ kg	Operating force	_____ kN
Maximum speed	_____ m/min	Maximum acceleration	_____ m/s ²

Please send us your inquiry: