

Apex Automations

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MATERIAL HANDLING APPLICATION DATA SHEET.

COMPANY NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____

ZIP: _____ TELEPHONE No: (____) _____

E-Mail: _____

SALES CONTACT: _____

ENGINEER CONTACT: _____

ENGINEER DEPT: _____ EXT No: _____

ENGINEER E-Mail: _____

PROJECT NAME; _____ QTY REQ' D : _____

PROPOSAL REQUIRED BY (DATE): _____

ESTIMATED INSTALL DATE: _____

PROTECTED / PART TO BE HANDELED: _____

_____ (INCLUDE PHOTOS, PART SAMPLES, DRAWINGS, VIDEOS & ETC...)

	WEIGHT (Kgs)	HEIGHT	WIDTH	LENGTH	I.D	O.D.
MAX:	_____	_____	_____	_____	_____	_____
MIN :	_____	_____	_____	_____	_____	_____

PREFERRED CLAMPING / GRIPPING LOCATION: _____

SPECIAL HANDLING CONSIDERATIONS: _____

SQUEEZE / GRIPPING LIMITATION: _____

MATERIAL FINISH: DRY _____ OILY _____ HOT _____ DUSTY _____ FRAGILE _____

OTHERS: _____

WORKING ENVIRONMENT: HOT _____ F COLD _____ F

NORMAL: _____ (75F TO 85F) CORRISVE _____ DUSTY _____

CURRENT HANDLING METHOD: MANNUAL _____ FORK LIFT _____

CRANE/HOIST: _____ OTHERS _____

UTILITES AVAILABLE:

ELECTRICAL(V) _____ PHASE _____

AIR PRESSURE: (60 – 70 PSI) _____ (70 – 80 PSI) _____ (80 – 90 PSI) _____

OPERATION DATA: NO OF CYCLES PER HR: _____ SHIFTS PER DAY: _____

SEQUENCE OF HANDLING OPERATION: _____

PICK UP PRODUCT FROM: PALLET (TYPE) _____

FLOOR _____ CONVEYOR (TYPE) _____

OTHRES _____

PART ORENTATION AT PICK UP: _____

PICK UP HEIGHT FROM FLOOR/PLATFORM TO BOTTOM THE PRODUCT _____

_____ IN MM.

RELEASE PRODUCT ONTO / INTO: PALLET(TYPE) _____

FLOOR: _____ CONVEYOR (TYPE) _____

OTHRES: _____

PART ORENTATION AT RELEASE _____

RELEASE HEIGHT FROM FLOOR/PLATFORM TO BOTTOM OF THE PRODUCT _____

_____ IN MM.

MOUNTING REQUIRED (PREFERRED):FIXED FLOOR_____PORTABLE_____
FIXED OVER HEAD_____OTHERS_____

PLS SPECIFY OVER HEAD STYLE & SIZE:_____

CONTROLS (PREFERRED): DUAL BALANCE_____TRIPLE BALANCE_____
QUAD BALANCE_____AUTO BALANCE_____PENDENT BALANCE_____
OTHERS SPECIFY:_____

END EFFECT (PREFERRED):MECHANICAL_____MAGNETIC_____
VACUUM_____HOOK_____OTHERS_____

ROTATION REQUIRED:_____

VERT TO HORIZ TILT/ROLL:_____

HORIZ TO VERT TILT/ROLL:_____

INSTALLATION AREA FREE OF OBSTACLES: YES_____NO(EXPLAIN)_____

NOTES & ADDITIONAL INFO:_____

ENCLOSURES: PART DRAWINGS_____SAMPLES_____

PHOTO / VIDEO:_____OTHERS_____