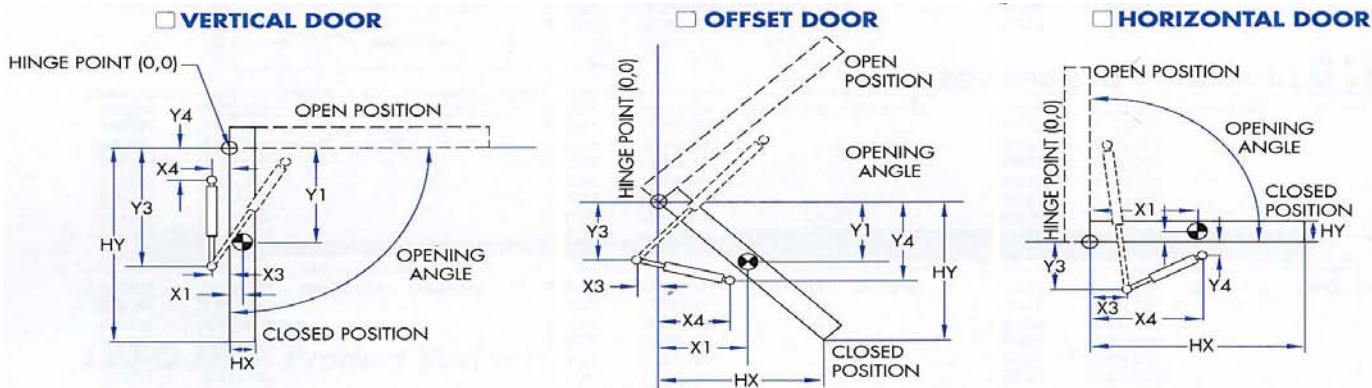


Name:			Date:
Title:			Requested Completion Date:
Company:			Type of Business:
Address:			Website:
City:	State:	Zip:	Authorized to Purchase Components for Manufacturing Yes <input type="checkbox"/> No <input type="checkbox"/>
Country:			
Phone:			Authorized to Sign Purchase Order Yes <input type="checkbox"/> No <input type="checkbox"/>
Fax:			Comments:
Email:			



### APPLICATION INFORMATION

Product/Project Name: \_\_\_\_\_

Estimated Annual Unit Volume: \_\_\_\_\_

Application Description (environment, cycle lift, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Desired action:  Autorise       Stay Down/Hold Open  
 Overcenter       Counterbalance

Dampening:  Extension     Compression     Extension & Compression  
 Heavy       Light

Based on your selected illustration, please give the following information:

Please note dimensions are in:  mm  inches

Center of Gravity X1 = \_\_\_\_\_ Y1 = \_\_\_\_\_  
(closed position)

Handle (closed position) HX = \_\_\_\_\_ HY = \_\_\_\_\_

Opening Angle = \_\_\_\_\_ degrees

Weight of door = \_\_\_\_\_  lbs.  kg.

**Preferred Mounting Location:**

Fixed X3 = \_\_\_\_\_ Y3 = \_\_\_\_\_

Moving X4 = \_\_\_\_\_ Y4 = \_\_\_\_\_

Drawings attached

**Handle loads desired:**

To Lift = \_\_\_\_\_ To Close = \_\_\_\_\_