

CONTACT INFORMATION

Customer _____
 Phone # _____
 Email _____

End User _____
 End User Location _____
 (City, State _____)

MACHINE INFORMATION

Industry _____
 Machine _____
 (Name of machine or operation)

APPLICATION

- NEW Reason for Replacement
- REPLACEMENT/CROSSOVER Quality
- Qty Required _____ Price
- Qty on Machine _____ Delivery
- Life

*For crossovers the more information provided, the better we can help. Pictures, video and notes

LIFE PROFILE

of Cycles: _____ per min per hr Actuator to hold position Yes No

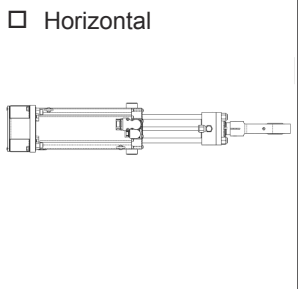
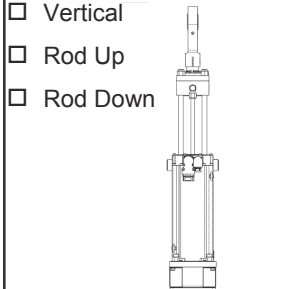
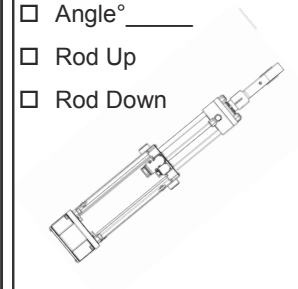
Use hrs per day _____ It hold required: After Move During Power Loss

Days per week _____

MOUNTING STYLE

- Clevis
- Rod End Sq. Flange
- Trunnion Head
- Mid-Trunnion XI= _____
- Other: _____

Mounting Orientation

<input type="checkbox"/> Horizontal 	<input type="checkbox"/> Vertical <input type="checkbox"/> Rod Up <input type="checkbox"/> Rod Down 	<input type="checkbox"/> Angle° _____ <input type="checkbox"/> Rod Up <input type="checkbox"/> Rod Down 
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MOVEMENT AND LOAD

EXTEND

Load _____ lbs kg

Travel _____ inches mm

Time _____ secs

Speed _____ in/secs mm/sec

RETRACTED

Load _____ lbs kg

Travel _____ inches mm

Time _____ secs

Speed _____ in/secs mm/sec

OPERATING ENVIROMENT

Any details on environment you can provide? Caustic? High or low Temp? Dust? Pitch? Marine?

What kind of performance do you require? Can you tell use about the application? Is it high speed? Heavy Impact? Low Friction?