

*Company:	*Job Name:		
Address:	*Location:	*Location State:	
	*Elevator #:	Building:	
*Contact Person:	ANSI Code Year A17.1-		
Phone:	*Email:		
Quote Needed By:	Estimated Ship Date:		
Original Manufacturer:			

New Construction

Modernization

GENERAL INFORMATION

*Car Labels	<input type="checkbox"/> Same as # _____	<input type="checkbox"/> Same as # _____	<input type="checkbox"/> Same as # _____
*Capacity	lbs	lbs	lbs
*Landings			
*Front Openings			
Rear Openings			
Side Openings			
*Voltage			
*Electrical Rating: Hoistway	<input type="checkbox"/> NEMA 1** <input type="checkbox"/> Other _____	<input type="checkbox"/> NEMA 1 <input type="checkbox"/> Other _____	<input type="checkbox"/> NEMA 1 <input type="checkbox"/> Other _____
*Electrical Rating: Machine Room	<input type="checkbox"/> NEMA 1** <input type="checkbox"/> Other _____	<input type="checkbox"/> NEMA 1 <input type="checkbox"/> Other _____	<input type="checkbox"/> NEMA 1 <input type="checkbox"/> Other _____

***Indicates Standard Material*

General Additional Information

FIXTURES - GENERAL (Complete for COP and/or HALL)

Indicate Pushbutton Type

*Round Buttons BS Series BP Series Dune
 *Braille Type Round Square Half Moon

FIXTURES - CAR OPERATING PANEL

Type	COP Style	COP Finish	COP Lamp Voltage	COP Engraving
<input type="checkbox"/> Main COP	<input type="checkbox"/> Applied Panel	<input type="checkbox"/> #4 Stainless	<input type="checkbox"/> 24	<input type="checkbox"/> No Smoking
<input type="checkbox"/> Auxiliary COP	<input type="checkbox"/> Hinged	<input type="checkbox"/> #4 Muntz	<input type="checkbox"/> Multivolt (6v-120v)	<input type="checkbox"/> Additional COP engraving
	<input type="checkbox"/> Dover Impulse	<input type="checkbox"/> #8 Stainless		
	<input type="checkbox"/> Swing Return	<input type="checkbox"/> #8 Muntz		

*** All items in red are Standard COP items.

Car Labels		<input type="checkbox"/> Same as # _____	<input type="checkbox"/> Same as # _____	<input type="checkbox"/> Same as # _____
Fire Service	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Provisions for Future Fire Service	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Fan Key Switch	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Light Key Switch	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Independent Service Key Switch	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Attendant Operation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Light Test Switch	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Hospital Emergency (Code Blue)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Inspection Key Switch	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Keyed Floor Lockouts	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Indicate Lockout Floor/s				
Attendant Cabinet	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Handsfree Phone	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Light	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Certificate Frame	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Phone Jack	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Intercom Provisions	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Card Reader Provisions	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Voice Annunciation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Digital PI in COP	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

FIXTURES - HALL STATIONS

Hall Station Type

- Flush (Incl Box)
- Flush (Reuse existing box)
- Surface Mount
- Pan Shaped

Hall Lamp Voltage

- 24
- Multivolt (6v-120v)

Digital Hall Station PI's

- No
- Yes
@Floors _____

Hall Station Finish

- #4 Stainless
- #4 Muntz
- #8 Stainless
- #8 Muntz

Hall Station Braille

- Yes
- No

Hall Station Engraving

- California - Main & Flames
- ANSI - 3 Flames
- Other / Special _____

Hall Station Lamp Type

- LED (Standard)

FIXTURES - LANTERNS

Lantern Type

- Car Lanterns
- Hall Lanterns

Finish

- #4 Stainless
- #4 Muntz
- #8 Stainless
- #8 Muntz

Lantern Style

- Horizontal
- Vertical

Arrow Style

- Triangle
- 3" Round
- Vandal Resistant
- Digital

Lantern Voltage

- 24
- Multivolt (6v-120v)

Mounting

- Standard (Incl. Box)
- Reuse Existing Box
- Surface Mount

FIXTURES - POSITION INDICATORS

- 7" Giotto
- Custom Display
- 2" Segmented

- Car
- With Direction Arrows
- No Arrows

- Hall
 - With Direction Arrows
 - No Arrows
- @Floors _____

- Digital Hall Position Indicators
 - Segmented
 - LED
 - Combo Digital w/ Lanterns
- @Floors _____

Lamp Type

- LED (Standard)

Finish

- #4 Stainless
- #4 Muntz
- #8 Stainless
- #8 Muntz

Mounting

- Standard (Incl. Box)
- Reuse Existing Box
- Surface Mount

Lamp Voltage

- 24
- Multivolt (6v-120v)

Fixture Additional Information _____
