

*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
Class of Loading			
Gross Weight	lbs	lbs	lbs
Travel*	ft/in	ft/in	ft/in
*Speed			
*Landings			
*Front Openings			
Rear Openings			
Side Openings			
Hatch Width			
Hatch Depth			
*Overhead			
*Pit Depth			
*Voltage			
*Phase			
*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 _____

**General Additional Information**

# TRACTION MACHINE

**Machine Location**

**\*Estimated Empty Car Weight**

**\*Counterweight %**

**\*Double Wrap Required**

Roping Drive Equipment

- |  |                                     |   |   |                                 |                                   |   |
|--|-------------------------------------|---|---|---------------------------------|-----------------------------------|---|
| <input type="checkbox"/> *Overhead                 | <input type="checkbox"/> *1:1       | <input type="checkbox"/> *VV/VF/AC            | <input type="checkbox"/> Machine              | <input type="checkbox"/> Geared | <input type="checkbox"/> Gearless | <input type="checkbox"/> Main Ropes                   |
| <input type="checkbox"/> *Basement                 | <input type="checkbox"/> *2:1       | <input type="checkbox"/> *DC-SCR              | <input type="checkbox"/> Hoist Motor          |                                 |                                   | <input type="checkbox"/> Governor Rope                |
| <input type="checkbox"/> *MRL                      |                                     | <input type="checkbox"/> *DC/MG Set           | <input type="checkbox"/> Encoder / Tachometer |                                 |                                   | <input type="checkbox"/> Rope Shackles (Weight-Type)  |
|  |                                     |   | Encoder / Tachometer Length _____             |                                 |                                   | <input type="checkbox"/> Existing Compensation        |
| <input type="checkbox"/> Governor / Tension Weight | <input type="checkbox"/> Car Safety | <input type="checkbox"/> Counterweight Safety |   |                                 |                                   | <input type="checkbox"/> Counterweight Frame          |
| <input type="checkbox"/> Deflector Sheaves         | <input type="checkbox"/> Type A     | <input type="checkbox"/> Type A               |   |                                 |                                   | <input type="checkbox"/> Counterweight Filler Weights |
|  | <input type="checkbox"/> Type B     | <input type="checkbox"/> Type B               |   |                                 |                                   |   |

**Traction Machine Additional Information**

*\*Required Information*