

Low Profile Light Duty Slider Bed Quoting Worksheet

Customer _____ Contact _____
 _____ Phone # _____
 _____ Date ____ / ____ / ____ P.O. # _____
 Quote # _____ Job # _____
 Delivery _____ Salesperson _____

Quantity: _____	Conveyor Length [2' to 12' (1' increments)] _____
Belt Specifications:	Degree of Incline: _____
BF: _____	Floor Distance: _____
Construction: <u>Bolt-Together 12 ga.</u>	Infeed Height to Top of Belt: _____
Belt Types: <input type="checkbox"/> Std RAV 100 Lite	Discharge Height to Top of Belt: _____
<input type="checkbox"/> Urethane	Paint Color: _____
<input type="checkbox"/> Neoprene	Leg Supports: _____
<input type="checkbox"/> Static Conductive	
Motor: <u>1/4</u> HP FPM: <u>20 - 40 - 50 - 70 - 103</u>	Options:
<input type="checkbox"/> Fixed <input type="checkbox"/> Variable (3:1 ratio AC)	<input type="checkbox"/> 1" Straight Side Skirts <input type="checkbox"/> PVC Side Guides
(10:1 ratio DC)	<input type="checkbox"/> 1" Flared Side Skirts <input type="checkbox"/> Discharge Guides
Drive Specs: <input type="checkbox"/> Shaft Mount	<input type="checkbox"/> 1 3/8" Flared Side Skirts <input type="checkbox"/> Top Mount Drive
Voltage: <input type="checkbox"/> 115V Single Phase <input type="checkbox"/> 460V Three Phase	<input type="checkbox"/> Casters <input type="checkbox"/> Bottom Mount Drive
<input type="checkbox"/> 230V Single Phase <input type="checkbox"/> 230V Three Phase	<input type="checkbox"/> DC Rated Motor 90V <input type="checkbox"/> Center Drive
Controls Required:	Any other pertinent information: _____
<input type="checkbox"/> Start/Stop <input type="checkbox"/> AC Tech Controller	_____
<input type="checkbox"/> E-Stop <input type="checkbox"/> DC Controller	_____
<input type="checkbox"/> None	_____

Material Specifications

Product(s) Being Conveyed: _____ Distance of Free Fall at Infeed: _____ Continuous/Intermittent
 _____ Does Product Operating Cycle: _____
 _____ Impact on Belt: _____ Conveyor Located Indoors/Outdoors: _____
 Minimum/Maximum Product Size: _____ Hours/Day of Operation: _____ Special Conditions: _____
 % of Fines Present: _____
 Product Density #/cu. ft.: _____
 Product Wt./Hr.: _____
 Maximum Live Load: 10# per foot up to 100# maximum
 Any Liquids Present: _____
 Product Temperature: _____
 Method of Loading: _____

Endura-Veyor Use Only

Quoting Notes: _____

