

Sassi Lift Systems Limited

Winding Unit Enquiry Form

Details of Project / Installation: Please complete and Return

Type MB MF GEKO LEO TORO GEARLESS

Duty Load _____ kg Speed _____ m/sec

Car Weight _____ kg Roping _____:1

Balanced at _____ % Rope Type / Manufacturer _____

Travel _____ M Groove Profile _____

Rope Compensation Fitted YES NO

Machine Location TOP

TOP AT SIDE

BOTTOM

"S" DRIVE

Extended Sheave shaft YES NO

Length Required _____ mm

Motor Type AC1 AC2 ACVV

VVVF OPEN LOOP

VVVF CLOSED LOOP

Preferred Motor Make SASSI

ZIEHL ABEGG

OTHER (Please specify)

Other Information: _____

Specification YES NO

Specification Requirements: _____

Sassi Lift Systems should reply with price and delivery to:

Name _____

Company _____

Date _____

Ref _____

Phone _____

Email _____

Fax _____