



Hoist Application Evaluation

Customer: _____	Phone: () - _____
Contact: _____	Fax: () - _____
Position: _____	Email: _____
Notes: _____ _____ _____	

APPLICATION: (Please describe what you plan on lifting and how you plan to use hoist):

MAKE: _____ MODEL: _____ SERIAL: _____

CAPACITY: _____ Tons TYPE: WIRE ROPE or CHAIN

LIFT: _____ Feet (Floor to Hook at uppermost point)

SUSPENSION: (Select One)

Rotating Top Hook
 Rigid Top Hook
 Rigid Lug
 Push Trolley
 Hand-Gear Trolley
 Motorized Trolley

POWER: (Select One)

MANUAL
 ELECTRIC
 AIR

VOLTS-PHASE-HERTZ

115-1-60
 230-1-60
 230-3-60
 460-3-60
 575-3-60
 Other _____

HOIST SPEED: _____ FPM # of SPEEDS: _____ FREQ. DRIVE: Y/N

TROLLEY SPEED: _____ FPM SOFT START: Y/N FREQ. DRIVE: Y/N

BEAM SIZE:

SHAPE: W / S / Pat. Track BOTTOM FLANGE WIDTH: _____ In. BEAM HEIGHT: _____ In.

PENDANT DROP: _____ Ft. or Std. (=Lift – 3 ft.) POWER CORD LENGTH: _____ Ft. or Std. (3 ft.)

OPTIONS: (Chain Container, 24V Control Voltage, Bullard Hook, Weatherproofing, Fuse Panel, Food Grade, Explosion Proof/Spark Resistant, Plated Chain, etc.)

ACCESSORIES: (Radio Control, Mainline Contactor, Variable Frequency Drive, Thermal Overloads, Fuse Panel, Cord Reel, Festoon, etc.)