

**Traction Geared Passenger  
Quote Request Form**

19336 607<sup>th</sup> Ave  
Mankato MN 56001  
Ph (507) 245-3060 Fax: (507) 245-4198  
An EOE/AA Employer

Today's Date: \_\_\_\_\_  
Quote Due Date: \_\_\_\_\_

Customer: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Email \_\_\_\_\_

Job Name: \_\_\_\_\_  
Job Location: \_\_\_\_\_

- New Construction  
 Modernization

Capacity: \_\_\_\_\_  
Class of Loading: \_\_\_\_\_ Landings: \_\_\_\_\_ Hoistway Width: \_\_\_\_\_ Overhead: \_\_\_\_\_  
Gross Weight: \_\_\_\_\_ Front Openings: \_\_\_\_\_ Hoistway Depth: \_\_\_\_\_ Pit Depth: \_\_\_\_\_  
Travel: \_\_\_\_\_ Rear Openings: \_\_\_\_\_ Platform Width: \_\_\_\_\_ Voltage: \_\_\_\_\_  
Speed: \_\_\_\_\_ Side Openings: \_\_\_\_\_ Platform Depth: \_\_\_\_\_ Phase: \_\_\_\_\_

Electrical Rating: Hoistway:  \* NEMA 1  NEMA: \_\_\_\_\_ Code:  ASME 17.1 \_\_\_\_\_ (yr)  
Machine Room:  \* NEMA 1  NEMA: \_\_\_\_\_  IBC \_\_\_\_\_  
 Other Codes \_\_\_\_\_

\* Indicates MEI standard materials

**HOISTWAY MODULE**

- INCLUDE THIS SECTION IN QUOTE**
- Platform subfloor material: \_\_\_\_\_  \* 1 Layer 3/4" Plywood
- Platform Finish Floor  
Thickness \_\_\_\_\_ weight \_\_\_\_\_ sq. ft (F/F by others)  Other: \_\_\_\_\_
- Sling, Painted Black  Other: \_\_\_\_\_
- Spring Buffers  Oil Buffers  Seismic Zone \_\_\_\_\_ (2,3,4)
- Rail Guides:  Slide  \* Roller  Swivel  Government Submittal Package
- Limit Switch Package, Car Top Station  Certified Engineer Stamp on Drawings
- Maintenance Manuals  Under Car Light With Outlet
- Other: \_\_\_\_\_  Platform Isolation  Full  Partial
- Isolation Standards: 6000 lbs. or Less - Fully Isolated  
Over 6000 lbs. - Partially Isolated to 10,000 lbs.

**TRACTION MACHINE MODULE**

- INCLUDE THIS SECTION IN QUOTE**
- Machine Location:  Overhead  Basement
- Roping:  1:1  2:1  Adjacent at top landing
- Drive:  VV/VF/AC  DC-SCR  Rope Gripper
- Equipment:  Machine  Hoist Motor  Encoder / Tachometer
- Main Ropes  Governor Rope  Rope Shackles (Wedge-Type)
- Governor / Tension Weight  Sheaves
- Car Safety  Type A  Type B
- Counterweight Safety  Type A  Type B (Required if Occupied Space Below Hoistway)
- Counterweight Frame  Counterweight Filler Weights
- Other: \_\_\_\_\_

## CONTROLLER MODULE

**INCLUDE THIS SECTION IN QUOTE**

- |              |  |  |  |
|--------------|--|--|--|
| Manufacture: | <input type="checkbox"/> * Elevator Control Corp.    | <input type="checkbox"/> GAL                           | <input type="checkbox"/> Motion Control Engineering        |
| Operation:   | <input type="checkbox"/> * Selective-Collective      | <input type="checkbox"/> * Single Automatic Pushbutton | <input type="checkbox"/> Call-Send                         |
|              | <input type="checkbox"/> *Simplex                    | <input type="checkbox"/> Duplex                        | <input type="checkbox"/> Group                             |
| Features:    | <input type="checkbox"/> * Phase I & II Fire Service | <input type="checkbox"/> * Independent Service         | <input type="checkbox"/> * Nudging                         |
|              | <input type="checkbox"/> * Tape Selector             | <input type="checkbox"/> Homing                        | <input type="checkbox"/> Hospital Service (Passenger Only) |
|              | <input type="checkbox"/> *On-Board Diagnostics       | <input type="checkbox"/> *Reverse Phase Detector       | <input type="checkbox"/> EMT -Code Blue (Passenger Only)   |
|              | <input type="checkbox"/> Hand Held Diagnostic        | <input type="checkbox"/> Emergency Generator Interface | <input type="checkbox"/> Lobby Panel Interface             |
|              | <input type="checkbox"/> Load-Weighing               | <input type="checkbox"/> Inconspicuous Riser           | <input type="checkbox"/> Monitor System Interface          |
|              | <input type="checkbox"/> Card-Reader Interface       | <input type="checkbox"/> Isolation Transformer         |  |
|              | <input type="checkbox"/> Other: _____                |  |  |

## ENTRANCE MODULE

**INCLUDE THIS SECTION IN QUOTE**

- Hoistway Wall Thickness: \_\_\_\_\_ "  Block  Drywall
- Jamb Construction:  \* Bolted  Welded / Mitered  Other: \_\_\_\_\_
- Jamb Finish:  \* Enamel / Primed  Stainless Steel  Bronze  #4  #8
- Door Finish:  \* Enamel / Primed  Stainless Steel  Bronze  #4  #8
- Sills:  \*Aluminum  Nickel-Silver  Bronze  Stainless Steel
- Groutless Sill
- Miscellaneous:  Sound-Deaden Doors  Sound-Deaden Frames  Weather-Stripping
- Others

## DOOR EQUIPMENT MODULE

**INCLUDE THIS SECTION IN QUOTE**

- \*GAL (MOVFR)  GAL (MOD)  GAL (MOVFR W-Weather Resistant)
- Other: \_\_\_\_\_

## DOOR PROTECTION MODULE

**INCLUDE THIS SECTION IN QUOTE**

- \*Adams "Gatekeeper"  Janus Panaforty Plus  3-D Protection  Tri-Tronic (NEMA 4)
- Others: \_\_\_\_\_

## FIXTURE MODULE

**INCLUDE THIS SECTION IN QUOTE**

- |          |   |   |   |
|----------|---|---|---|
| Type:    | <input type="checkbox"/> * MEI Tilt Panel                       | <input type="checkbox"/> Stationary (Applied) Panel             | <input type="checkbox"/> Full Swing                       |
| Style:   | <input type="checkbox"/> * Square Buttons                       | <input type="checkbox"/> Round Buttons                          | <input type="checkbox"/> Vandal-Resistant Buttons         |
| Finish:  | <input type="checkbox"/> * Stainless Steel                      | <input type="checkbox"/> Bronze                                 | <input type="checkbox"/> * #4 <input type="checkbox"/> #8 |
| Features | <input type="checkbox"/> * Car Position Indicator               |   |   |
|          | <input type="checkbox"/> Hall Position Indicator(s): Qty: _____ |   |   |
|          | <input type="checkbox"/> * Car Lantern(s)                       | <input type="checkbox"/> Hall Lanterns                          | <input type="checkbox"/> Certificate Frame                |
|          | <input type="checkbox"/> * Hall Stations                        | <input type="checkbox"/> EMT Service – Code Blue                | <input type="checkbox"/> Hospital Service                 |
|          | <input type="checkbox"/> *ADA Hands-Free Phone                  | <input type="checkbox"/> Service Cabinet                        | <input type="checkbox"/> Photo-Eye Keyswitch              |
|          | <input type="checkbox"/> * Top Access Keyswitch                 | <input type="checkbox"/> Independent Service Keyswitch          | <input type="checkbox"/> * Bottom Access Keyswitch        |
|          | <input type="checkbox"/> Emergency Light Test Button            | <input type="checkbox"/> 120 VAC Outlet                         | <input type="checkbox"/> * Inspection Keyswitch           |
|          | <input type="checkbox"/> Card-Reader Cut-Out                    | <input type="checkbox"/> Fireman's Phone Jack                   | <input type="checkbox"/> * Light Keyswitch                |
|          | <input type="checkbox"/> * Fan Keyswitch                        | <input type="checkbox"/> Special Engraving: _____               |   |
|          | <input type="checkbox"/> Auxiliary Car Operating Panel          | <input type="checkbox"/> *NEMA 1 (or other NEMA Rating s) _____ |   |
|          | <input type="checkbox"/> Other: _____                           |   |   |

## CAB MODULE

### Overall Size

Platform Width: \_\_\_\_\_ x Depth: \_\_\_\_\_

Finished Floor Material/Thickness: \_\_\_\_\_

Cab Height: \_\_\_\_\_

### Wall Configurations

#### Service Cab (Steel Shell)

Painted: \_\_\_\_\_  
(choose from our standard paint colors or choose your own)

Metal: \_\_\_\_\_  
(brushed, polished, or patterned stainless; brushed bronze)

#### Plastic Laminate

Laminate: \_\_\_\_\_  
(choose from our plastic laminate chart)

#### Removable/Applied Panels

Removable Panel  Applied Panel

Panel Finish: \_\_\_\_\_  
(choose from our laminate chart or metal finishes)

Reveal/Frieze/Base: \_\_\_\_\_  
(paint or metal finish, same options as steel shell service cab)

#### Glass Wall (s) (add to one of the cabs above)

Rear  1 Side  2 Sides  Front

Frame Finish: \_\_\_\_\_ (brushed stainless, aluminum)

### Door Configuration

Front Only  Front & Rear  Front & Side

Single-Speed  Two-Speed

Opening:  Right-Hand  Left-Hand  Center

Door Opening Width: \_\_\_\_\_ x Height: \_\_\_\_\_

Door Finish: \_\_\_\_\_  
(painted; plastic laminate; brushed, polished, or patterned stainless; brushed bronze)

Transom, Return, & Jamb Finish: \_\_\_\_\_  
(painted; brushed, polished, or patterned stainless; brushed bronze)

COP Location:  Return  Side Wall

### Handrails

Location:  Rear Wall  Side Walls

Type:  Round  Flat  Wood

Returned Ends:  Yes  No (for round or flat)

Handrail Size: \_\_\_\_\_ (see table below)

Material: \_\_\_\_\_  
(brushed stainless or bronze for round or flat, maple or oak for wood)

Round Sizes	1-1/2" or 2" diameter
Flat Sizes (Hollow)	1/2" x 1-1/2"
Flat Sizes (Solid)	1/2" x 1-1/2"   3/8" x 2", 3", 4", 6"   1/4" x 4", 6"
Wood Sizes	1-1/2" x 5-1/2", 7-1/2", 9-1/2", 11-1/2"

### Bumpers

Flat With  Returned Ends  Straight Ends

Wood

Bumper Size: \_\_\_\_\_ (see table below)

Material: \_\_\_\_\_  
(brushed stainless for flat, maple or oak for wood)

Number of Bumper Rows: \_\_\_\_\_

Flat Sizes (Solid)	3/8" x 8", 1/4" x 8"
Wood Sizes	1-1/2" x 5-1/2", 7-1/2", 9-1/2", 11-1/2"

### Ceiling/Lighting

#### Aluminum Frame Ceiling

w/Lexan Diffusers  w/Eggcrate Diffusers

Fluorescent Lights  LED Lights

#### Downlight Island Ceiling

Finish: \_\_\_\_\_  
(painted; plastic laminate; brushed or polished stainless; brushed bronze)

High Voltage Incandescent Lights

Low Voltage Halogen Lights

Perimeter Lighting

#### Cove/Trough Lighting

Fluorescent Lights Recessed in Canopy

High Voltage Lights Recessed in Canopy

Low Voltage Lights Recessed in Canopy

### Sill

Aluminum  Nickel Silver

Bronze  Stainless Steel

## WIRING MODULE

**INCLUDE THIS SECTION IN QUOTE**

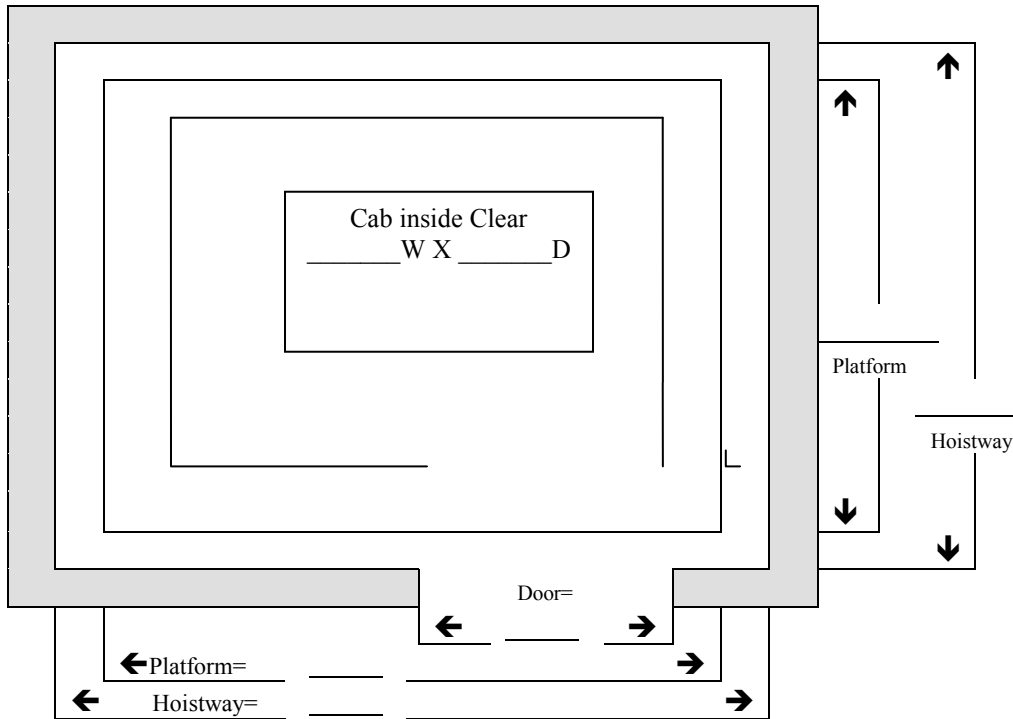
- \* MEI Standard Package w/3 Pair Shielded Cable
- Additional Pair Shielded    Quantity: \_\_\_\_\_
- Coaxial Cable                      Quantity: \_\_\_\_\_
- Other : \_\_\_\_\_

## RAIL MODULE

**INCLUDE THIS SECTION IN QUOTE**

**T-Shaped Rails are Provided**

## ELEVATOR DATA



Enter Floor Markings & Travel  
for Each Floor Served

Overhead		
12		12
11		11
10		10
9		9
8		8
7		7
6		6
5		5
4		4
3		3
2		2
1		1
Pit Depth		
	<b>Front    Rear</b>	

Arch. Prints Available?     Yes     No

Shared Hoistway             Yes     No