

**Hydro Freight
Quote Request Form**

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

Quote Due Date: _____

 Customer: _____
 Contact: _____
 Address: _____

 Job Name: _____
 Job Location: _____

 Phone: _____ Fax: _____
 New Construction Email _____
 Existing

| JACK TYPE | |
|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Borehole | <input type="checkbox"/> Single Stage |
| <input type="checkbox"/> Holeless | <input type="checkbox"/> Multi Stage |
| <input type="checkbox"/> Roped Hydro | <input type="checkbox"/> Twin Jack |

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

 Electrical Rating: Hoistway: * NEMA 1 NEMA: _____ Code: ASME A17.1 _____ (yr)
 Machine Room: * NEMA 1 NEMA: _____ IBC _____
 Other Codes _____

* Indicates MEI standard materials

HOISTWAY MODULE
 INCLUDE THIS SECTION IN QUOTE
 Platform Finish Floor Thickness: _____ Weight: _____ Sq. Ft. *Steel Checker Plate _____ "
 Sling, Spring Buffer, Painted Black Other _____
 Rail Guides: *Slide Roller Swivel Others _____
 Limit Switch Package, Car Top Station Seismic Zone: _____ (2,3,4)
 Maintenance Manuals Government Submittal Package
 Other _____ Certified Engineer Stamp on Drawing
 Under Car Light With Outlet

JACK MODULE
 INCLUDE THIS SECTION IN QUOTE
 Maximum Jack length _____
 Maximum Jack section length _____
 Maximum Pressure Allowed _____ * Factory Tape Wrap (Inground Cars only)
 PVC Casing Sch 40 _____ Sch 80 _____ Other: _____

POWER UNIT MODULE

| | |
|--|---|
| <input type="checkbox"/> INCLUDE THIS SECTION IN QUOTE <input type="checkbox"/> * Submersible <input type="checkbox"/> * 80 Starts /hr <input type="checkbox"/> Dry <input type="checkbox"/> 120 Starts /hr Machine Room: <input type="checkbox"/> * Adjacent @ Lowest Level <input type="checkbox"/> Adjacent _____ feet above lowest level <input type="checkbox"/> Remote _____ feet from hoistway <input type="checkbox"/> Shared Machine Room | Additional Options <input type="checkbox"/> Pre-mount Controller <input type="checkbox"/> Oil Level Sensor <input type="checkbox"/> Oil Viscosity Switch <input type="checkbox"/> Low Pressure Switch <input type="checkbox"/> Oil Level Sight Gauge <input type="checkbox"/> Load Weighing Switch <input type="checkbox"/> Tank Heater <input type="checkbox"/> Oil Cooler - MEI <input type="checkbox"/> Oil Return Pump <input type="checkbox"/> Oil Return Pump w/Copper Tube <input type="checkbox"/> Other _____ |
|--|---|

PIPING MODULE

INCLUDE THIS SECTION IN QUOTE

- | | | | |
|--|--|--|--------------------------------------|
| <input type="checkbox"/> * MEI Standard Package Includes Pipe, Pipe Stands, Shutoffs, and Fittings | <input type="checkbox"/> _____ Isolation Couplings | <input type="checkbox"/> Mainline Strainer | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Overspeed Valve | <input type="checkbox"/> Seamless Pipe | <input type="checkbox"/> Sch 80 Pipe | |
| | <input type="checkbox"/> Threaded Pipe | <input type="checkbox"/> Grooved Pipe | |

CONTROLLER MODULE

INCLUDE THIS SECTION IN QUOTE

- | | | |
|---|--|--|
| Manufacturer: <input type="checkbox"/> * Vertitron Midwest, Inc (VMI) | <input type="checkbox"/> Elevator Controls Corp. | <input type="checkbox"/> Other: _____ |
| Operation: <input type="checkbox"/> Selective Collective | | |
| Starter: <input type="checkbox"/> * Simplex | <input type="checkbox"/> Duplex | <input type="checkbox"/> Group |
| Starter: <input type="checkbox"/> * Wye Delta | <input type="checkbox"/> Across the Line | <input type="checkbox"/> Electronic Soft Start |
| Features: <input type="checkbox"/> * Phase I & II Fire Service | <input type="checkbox"/> Oil Viscosity | <input type="checkbox"/> Nudging |
| <input type="checkbox"/> * Independent Service | <input type="checkbox"/> * On-Board Diagnostics | <input type="checkbox"/> Homing |
| <input type="checkbox"/> * Low Oil Circuitry | <input type="checkbox"/> Attendant Operation | <input type="checkbox"/> Battery Lowering |
| <input type="checkbox"/> * Reverse Phase Detector | <input type="checkbox"/> Inconspicuous Riser | <input type="checkbox"/> Lobby Panel Interface |
| <input type="checkbox"/> * Tape Selector | <input type="checkbox"/> Load Weighing Overload | <input type="checkbox"/> Emer. Generator Interface |
| <input type="checkbox"/> Load Weighing Hall Call Bypass | | |
| <input type="checkbox"/> Monitor System Interface | <input type="checkbox"/> Other: _____ | |

CAB MODULE

INCLUDE THIS SECTION IN QUOTE

- | | | | |
|--|---|---|---|
| Shell: <input type="checkbox"/> * Steel | <input type="checkbox"/> Custom _____ | | |
| Finish: <input type="checkbox"/> * Enamel | | | |
| <input type="checkbox"/> Stainless Steel (SS) | <input type="checkbox"/> #4 | <input type="checkbox"/> Textured (5SM Rimex) | <input type="checkbox"/> Other _____ |
| Bumpers: <input type="checkbox"/> 1 1/2" x 6" Oak | <input type="checkbox"/> 1 1/2" x 8" Oak | <input type="checkbox"/> 1 1/2" x 10" Oak | <input type="checkbox"/> 1 1/2" x 12" Oak |
| <input type="checkbox"/> 3/8" x 3" SS #4 | <input type="checkbox"/> 3/8" x 4" SS #4 | <input type="checkbox"/> 1/4" x 4" SS #4 | <input type="checkbox"/> 1/4" x 6" SS #4 |
| <input type="checkbox"/> Back Wall | <input type="checkbox"/> Side Wall | | |
| Canopy <input type="checkbox"/> * Enamel w/ Recessed Fluorescent Lights | | | |
| <input type="checkbox"/> Other _____ | | | |
| Cab Height: <input type="checkbox"/> * 8 feet | <input type="checkbox"/> Other: _____ | | |
| Emerg Light: <input type="checkbox"/> * In Car Operating Panel | <input type="checkbox"/> Incorporated into regular cab lighting | | |
| Finish Floor: <input type="checkbox"/> * Checker Plate Thickness: _____" | <input type="checkbox"/> Other: _____ | | |
| Options: <input type="checkbox"/> Pads and Hooks | <input type="checkbox"/> Other: _____ | | |
| <input type="checkbox"/> Fan | | | |

FREIGHT DOOR & GATE MODULE

INCLUDE THIS SECTION IN QUOTE

- | | | | |
|---|---|--|---|
| Number of Doors Required: _____ | Hoistway Wall Thickness _____" | <input type="checkbox"/> Block | <input type="checkbox"/> Drywall |
| Door Size: _____ x _____ | | | |
| <input type="checkbox"/> Power Doors (includes light curtain) | <input type="checkbox"/> Manual Doors | | |
| <input type="checkbox"/> Auto Open | <input type="checkbox"/> Auto Close | | |
| Door Finish: <input type="checkbox"/> * Enamel Powder Coat | <input type="checkbox"/> Stainless Steel Construction | | |
| <input type="checkbox"/> #4 S/S Finish | <input type="checkbox"/> Textured (5 SM Rimex) | | |
| Gate Finish: <input type="checkbox"/> Enamel Power Coat | <input type="checkbox"/> Stainless Steel Wire Mesh 2B Mill Finish | | |
| <input type="checkbox"/> #4 S/S Finish | <input type="checkbox"/> Textured (5 SM Rimex) | | |
| Options: <input type="checkbox"/> Full Height Gate | <input type="checkbox"/> Solid Panel Gate | <input type="checkbox"/> #4 S/S Finish | <input type="checkbox"/> Textured (5SM Rim) |
| Other: <input type="checkbox"/> _____ | | | |

FIXTURE MODULE

INCLUDE THIS SECTION IN QUOTE

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

WIRING MODULE

INCLUDE THIS SECTION IN QUOTE

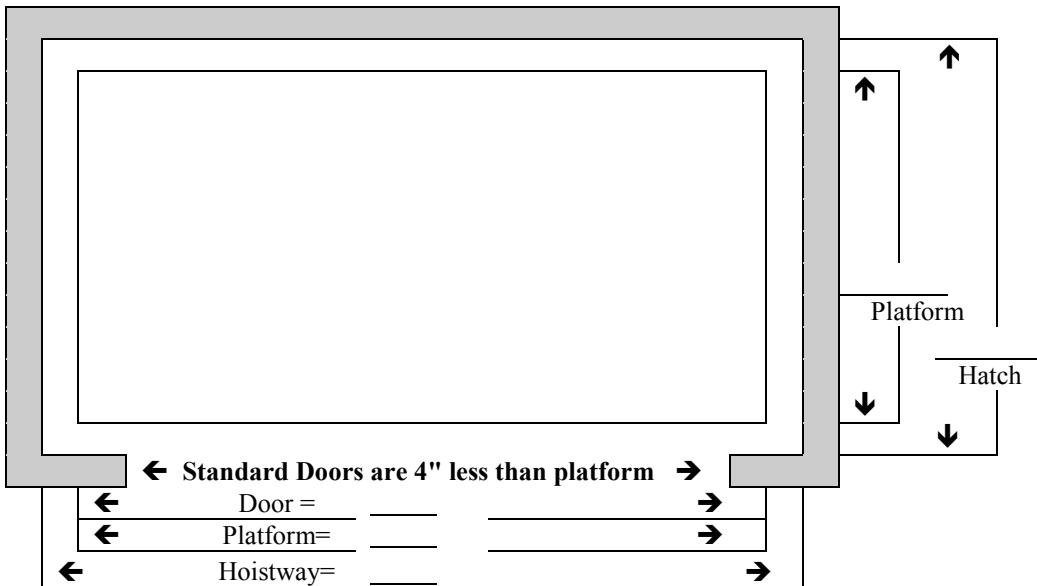
- * MEI Standard Package w/3 Pair Shielded Cable
- Additional Pair Shielded Quantity _____
- Coaxial Cable Quantity _____
- Other : _____

RAIL MODULE

INCLUDE THIS SECTION IN QUOTE

T-Shaped Rails are Provided

ELEVATOR DATA



- Arch Prints Available: Yes No
- Shared Hoistway: Yes No

| Enter floor markings & travel for each floor served | | |
|---|--|------|
| Overhead | | |
| 12 | | |
| 11 | | |
| 10 | | |
| 9 | | |
| 8 | | |
| 7 | | |
| 6 | | |
| 5 | | |
| 4 | | |
| 3 | | |
| 2 | | |
| 1 | | |
| Pit Depth | | |
| Front | | Rear |