

**Hydro Passenger
Quote Request Form**

19336 607th 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: _____

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: _____
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 A17.1 _____ yr
Machine Room: * NEMA 1 NEMA: _____ IBC _____
 Other Codes _____

* Indicates MEI standard materials

HOISTWAY MODULE

INCLUDE THIS SECTION IN QUOTE

Platform Subfloor Material: _____
Platform Finish Floor Thickness _____ weight _____ sq. ft. (F/F by others) * 1 layer 3/4" plywood
 Other _____

Sling, Spring Buffers, Painted Black Others _____
 Rail Guides: * Slide Roller Swivel Seismic Zone _____ (2,3,4)
 Limit Switch Package/Car Top Station Government Submittal Package
 Maintenance Manuals Certified Engineer Stamp on Drawings
 Other _____ Under Car Light with Outlet
 Platform Isolation Full Partial

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

INCLUDE THIS SECTION IN QUOTE

<p>Machine Room: <input type="checkbox"/> * Submersible <input type="checkbox"/> * 80 Starts /hr <input type="checkbox"/> Dry <input type="checkbox"/> 120 Starts /hr</p> <p><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</p>	<p style="text-align: center;">Additional Options</p> <p><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 _____</p>
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PIPING MODULE

INCLUDE THIS SECTION IN QUOTE

- * MEI Standard Package Includes Pipe, Pipe Stands, Shutoffs, and Fittings
- _____ Isolation Couplings
- Overspeed Valve
- Mainline Strainer
- Seamless Pipe
- Threaded Pipe
- Other _____
- Sch 80 Pipe
- Grooved Pipe

CONTROLLER MODULE

INCLUDE THIS SECTION IN QUOTE

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

WIRING MODULE

INCLUDE THIS SECTION IN QUOTE

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

FIXTURE MODULE

INCLUDE THIS SECTION IN QUOTE

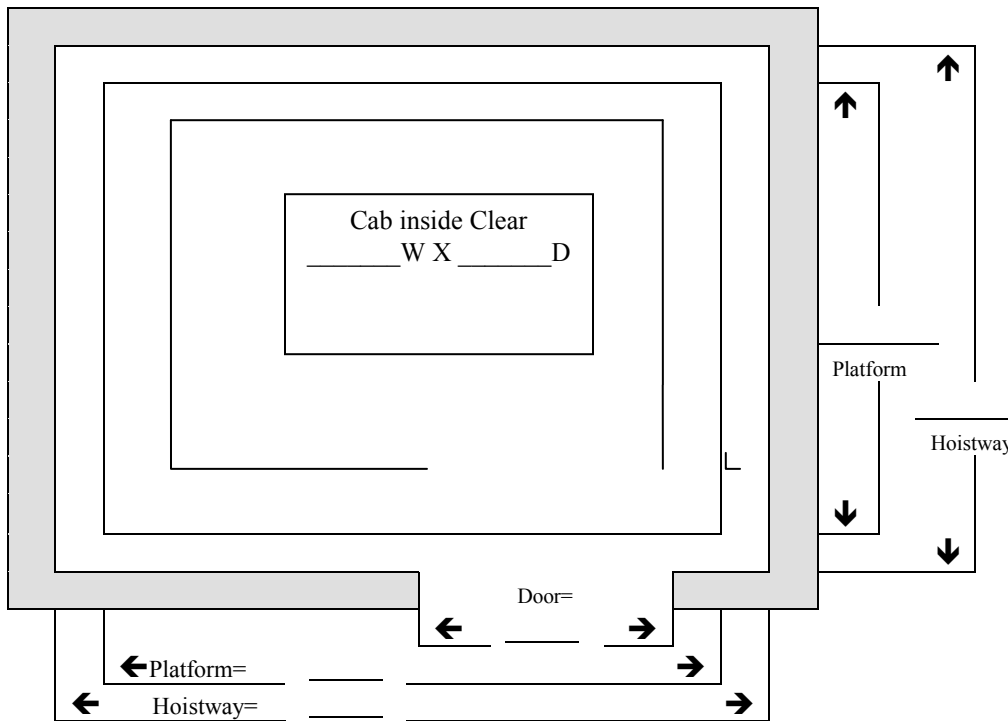
- | | | |
|---|---|---|
| Type: <input type="checkbox"/> * MEI Tilt Panel | <input type="checkbox"/> *Stationary (Applied) Panel
<input type="checkbox"/> Round Buttons
<input type="checkbox"/> Bronze | <input type="checkbox"/> Full Swing
<input type="checkbox"/> Vandal-Resistant Buttons
<input type="checkbox"/> * #4 <input type="checkbox"/> #8 |
| Style: <input type="checkbox"/> * Square Buttons | | |
| Finish: <input type="checkbox"/> * Stainless Steel | | |
| Features: <input type="checkbox"/> * Car Position Indicator | | |
| <input type="checkbox"/> Hall Position Indicator(s): Qty: _____ | <input type="checkbox"/> Hall Lanterns | <input type="checkbox"/> Certificate Frame |
| <input type="checkbox"/> * Car Lantern(s) | <input type="checkbox"/> EMT Service – Code Blue | <input type="checkbox"/> Hospital Service |
| <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: _____ | | |

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	-----	
Front		Rear

Arch. Prints Available? Yes No

Shared Hoistway Yes No