INQUIRY FORM

CONVEYORS FOR PRESSES

Please fill in the details you know. We will be happy to clarify the rest with you during a consultation.

Basic data

Customer _____

Conveyor: ☐ single conveyor qty _____ ☐ conveyor line qty _____ (please specify in the notes)

Intended conveyor type: ☐ hinged belt (CDT) ☐ magnetic (DM) ☐ belt (PD)

Conveyor shape: ☐ straight ☐ 1× angled ☐ 2× angled

Conveyor position

☐ inside the machine

☐ next to the machine (side)

☐ behind the machine (front)

☐ below machine level (underfloor)

Press details

Press type _____

Manufacturer _____ Year built _____

Operating hours: ☐ single shift ☐ multiple shifts

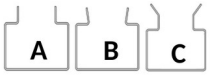
Planned operating hours _____ hours/day

Conveyor dimensions

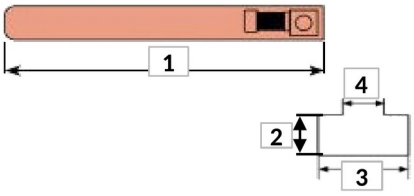
Fill in the dimensions for the selected conveyor shape only. Dimensions in mm, angles in °.

straight

Housing profile



Profile: ☐ A ☐ B ☐ C



Dimension no. 1 _____ mm

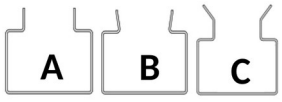
Housing height no. 2 _____ mm

Housing width no. 3 _____ mm

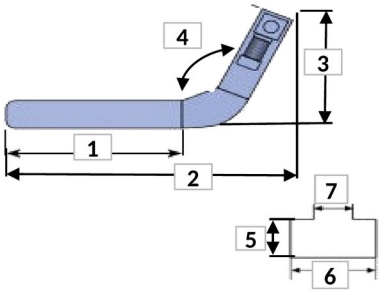
Usable width no. 4 _____ mm

1× angled (L-shape)

Housing profile



Profile: ☐ A ☐ B ☐ C



Dimension no. 1 _____ mm

Dimension no. 2 _____ mm

Dimension no. 3 _____ mm

Angle no. 4 _____ °

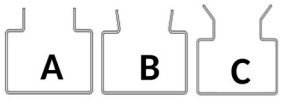
Housing height no. 5 _____ mm

Housing width no. 6 _____ mm

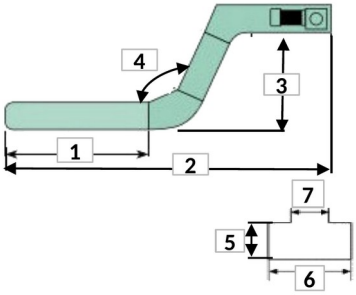
Usable width no. 7 _____ mm

2× angled (Z-shape)

Housing profile



Profile: ☐ A ☐ B ☐ C



Dimension no. 1 _____ mm

Dimension no. 2 _____ mm

Dimension no. 3 _____ mm

Angle no. 4 _____ °

Housing height no. 5 _____ mm

Housing width no. 6 _____ mm

Usable width no. 7 _____ mm

Conveyed material

Press scrap – size (dimensions)

min. _____ mm

max. _____ mm

quantity per press stroke _____ kg

max. temperature _____ °C

or

Finished stampings – size (dimensions)

size _____ mm

weight _____ kg

amount _____ kg/min, pcs/min

max. temperature _____ °C

Material: ☐ steel ☐ stainless steel ☐ light alloys other _____

Accessories and additional information

Electrical equipment

☐ control cabinet or ☐ terminal box

Other equipment (optional) ☐ overload protection ☐ emergency stop switch other _____

Conveyor discharge

☐ single container or ☐ multiple containers qty _____ pcs (optional)

Container dimensions (L × W × H) _____ mm

Lubricant collection tank

☐ collection tank (optional) tank position _____

☐ pump capacity _____ l/min pressure _____ bar

Painting

Colour RAL _____

Notes