

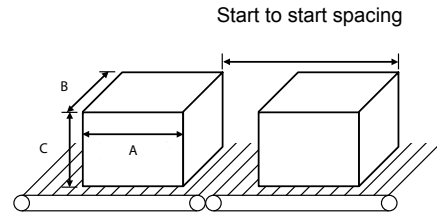
Motoweigh Conveyor, Conveyor Scale or Checkweigher Application



Company/End User (full name) _____ Contact _____
 Address _____ City _____
 Phone _____ State/Zip _____
 Sales Organization _____ Sales Person _____

PRODUCT SPECIFICATIONS

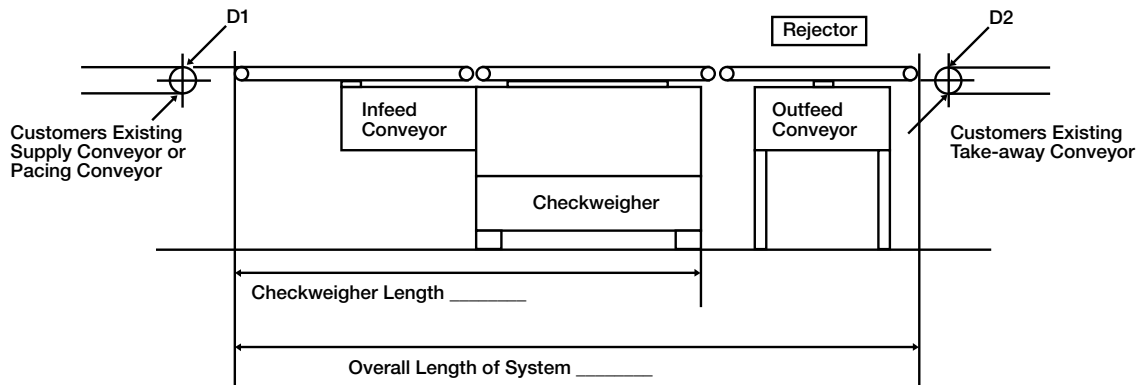
- | | | | |
|---------------------------------|-----------------------------------|---|--|
| | <input type="checkbox"/> Conveyor | <input type="checkbox"/> Conveyor Scale | <input type="checkbox"/> Checkweigher |
| Preferred Measurements | <input type="checkbox"/> Inches | <input type="checkbox"/> Millimeters | and <input type="checkbox"/> Grams <input type="checkbox"/> Ounces <input type="checkbox"/> Pounds |
| Controlled Spacing | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| <input type="checkbox"/> Liquid | <input type="checkbox"/> Solid | <input type="checkbox"/> Misc. Components | |
| Opened | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Uniform Packages | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Random Shaped Product | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |



Container Type and Contents		A= Length	B= Width	C= Height	Pitch = leading edge to leading edge	Speed Packs./Min.	Product Weight	+/- Accuracy
	Min.							
	Max.							
	Min.							
	Max.							

Package/Sample available prior to quote Yes Photo Video No

Describe package _____



Available Length for System _____ Working Direction Left to Right Right to Left
 Line Height: _____ Infeed Line Speed: Min. _____ Fixed _____ Max. _____
 Infeed Width: _____ Roll Diameter: D1 _____ D2 _____
 Preferred Material: Stainless Steel Aluminum

FACTORY INSTALLS ARE REQUIRED

Purpose of Checkweigher

Inspection for under/over weight packages

Check package quantity

Acquisition of production data

Feedback to filling machine interface

Classification of weights

Shipping or Receiving

Other _____

<p>Cleaning</p> <p><input type="checkbox"/> No cleaning (IP45)</p> <p><input type="checkbox"/> Air Pressure (IP54)</p> <p><input type="checkbox"/> Wet Rag (IP55)</p> <p><input type="checkbox"/> Water Pressure (IP65)</p> <p><input type="checkbox"/> IP66/NEMA 4X</p> <p>Solvents used _____</p>	<p>Frequency</p> <p><input type="checkbox"/> Once a month</p> <p><input type="checkbox"/> Once a week</p> <p><input type="checkbox"/> Once a day</p> <p><input type="checkbox"/> Once a shift</p>
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Options

Additional Pacing Conveyor (for product spacing)

Guide Rails Round Flat Sheet

Portable Caster Package (non NTEP only)

Draft Shield

Rejection Alarm

Remote Display

Signal Lamps Five Zone Three Zone

Red	Yellow
Yellow	Green
Green	Red
Yellow	
Red	

Barcode Scanner

Reject Device:

Pusher Air Blade Arm

Drop Out Stop Conveyor

Other _____

Approvals

NTEP

UL 508/508A

Other _____

Working Environment

Temperature _____

Relative humidity _____

Installation location

Ground floor

2nd floor

Mezzanine

Airflow Yes No

Vibration Yes No

Air Conditioning Yes No

Available Air Pressure

Min. _____ Max. _____

Power

115 VAC 50/60 Hz

208 VAC 50/60 Hz three phase

230 VAC 50/60 Hz single phase

230 VAC 50/60 Hz three phase

480 VAC 50/60 Hz three phase

HMI controlled speed based on product section eight zone

Communication Interface Options - select one

Transmission of weights

Statistical protocol

Networking

Database & Tolerance acquisition

Method of Communication - select one

RS-232

RS-485 AllenBradley Remote I/O

Wireless Ethernet AllenBradley DeviceNet

Ethernet TCP/IP AllenBradley EtherNet IP

Profibus

STD Serial String: Product ID>|<weight>|<Units Label>|<STX>|<Address>|<Accepted or Rejected>|<ETX>

NOTE: Please list Serial String in Special Information box, if different:

Special Information
