



ATEX / IECEx Quote Form

* Indicates a required field
• In box is standard feature

Section A Contact Information

*Your Name

*Company Name

*Address

*City

*State *Zip

*Phone

*Fax

*Email

*Sales Area

Section B Project Information

Customer Reference
(for project) Number

Project Name

Location

Project
Due Date

Section C Motor Information

*Replacement Motor	No	Yes	If Yes, Serial#
*Quantity			
*Motor Protection			
*Inverter Use	No	Yes	
* If you select frequency range enter Hz min/max			
*Phase			
*KW			
*RPM			If > 8-pole enter here
*Hertz	50	60	

Section C
Motor Information
 (cont'd)

*Voltage	230/400 (63 to 112) 400/690 (132 to 315) standard solution		
	Other (specify)		
*IP Code			*Frame
*Mounting	Horizontal	Vertical	*If vertical choose from the drop down
* Flange Mounting			
*Bearing Type	Specify other bearing type here		
*Load			*Efficiency Level
*Service Factor	1.00 is default		
Elevation (Feet/Meter)	i.e. 3300/1000		
Application			*Area Classification
*Zone			*Group
*Temperature Code			
*Specification	If other specify here		
Enclosure	IC410 - TENV IC411 - TEFC IC416 - TEBC IC418 - TEAO - airflow		
Enclosure Finish			
*Terminal Box Mounting			
Terminals	6 Terminals	Other / Enter Terminals	
Terminal Construction	IP55	IP65	

Section D
Additional Requirements

Auxiliary Terminal Box			
Protection Driven			
Space Heaters	yes	Voltage / Phase	
Brake			Voltage / Phase
Special Ambient Temp.		40° C is our standard	
Special Requirements / Notes			

Urgent call me right away

To Submit Quote:

1. Select **Save As** from the file menu.
2. Name the file with your project number or project name.
3. Email your PDF to your Sales Representative.