


Portec Spiral Belt Conveyor Inquiry Form

Customer #		Quote #		Date:		
Name:		Salesperson:				
Company:		Project Time Frame:				
Project:		<input type="checkbox"/> 1-2 mos <input type="checkbox"/> 2-6 mos <input type="checkbox"/> 6-12 mos <input type="checkbox"/> Unknown <input type="checkbox"/> Budget				
Address:		Decision Time Frame:				
Phone:		Fax:		<input type="checkbox"/> 1-3 wks <input type="checkbox"/> 1-2 mos <input type="checkbox"/> 2-6 mos <input type="checkbox"/> 6-12 mos <input type="checkbox"/> Unknown		
Product Information						
Material Handled:						
Product Dimensions						
Length:		<input type="checkbox"/> in	<input type="checkbox"/> mm	Distance between packages: <input type="checkbox"/> in <input type="checkbox"/> mm		
Width:		<input type="checkbox"/> in	<input type="checkbox"/> mm	Is product transfer a concern? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Height:		<input type="checkbox"/> in	<input type="checkbox"/> mm	Is product orientation critical? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Product Weight:		<input type="checkbox"/> lbs	<input type="checkbox"/> kg	If yes, explain:		
Design Load (if applicable):		<input type="checkbox"/> lbs/ft	<input type="checkbox"/> kg/m	Are there any special environmental conditions, i.e., dust, oil, chemicals, moisture, etc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Packaged <input type="checkbox"/> Not Packaged		If yes, specify:				
Is there anything special about the product? <input type="checkbox"/> Yes <input type="checkbox"/> No		Ambient Temperature: <input type="checkbox"/> °F <input type="checkbox"/> °C				
If yes, specify:		Clean Room		Freezer		
Surface Contact (product on belt, i.e., shrink-wrap, plastic tote, cardboard, furniture with feet, etc.):						
		<input type="checkbox"/> FDA Application		<input type="checkbox"/> USDA Application <input type="checkbox"/> Bakery		
Oils used in product:						
Technical Information						
Equip. Spec:		Revision #:		Accessories		
Incline:		Decline:		Drive package required? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Entry height top of belt:		<input type="checkbox"/> in	<input type="checkbox"/> mm	Customer Supplied Drives: Refer to factory.		
Exit height top of belt:		<input type="checkbox"/> in	<input type="checkbox"/> mm	Customer supplied drives to: <input type="checkbox"/> Portec <input type="checkbox"/> Site		
Total elevation differential:		<input type="checkbox"/> in	<input type="checkbox"/> mm	Motor Brand: <input type="checkbox"/> Reliance		
Is there an outside dimension limitation? <input type="checkbox"/> Yes <input type="checkbox"/> No				Reducer Brand: <input type="checkbox"/> Dodge Tigear II		
Model Number (if known):				Motor voltage required: <input type="checkbox"/> V. <input type="checkbox"/> Ph.		
Total degrees of arc:				Sideguard height at inside radius: <input type="checkbox"/> in <input type="checkbox"/> mm		
No. of modules & arcs:				Sideguard height at outside radius: <input type="checkbox"/> in <input type="checkbox"/> mm		
Direction of travel:		Drive location:		Supports required? (curve) <input type="checkbox"/> Yes <input type="checkbox"/> No		
Belt speed required at centerline: <input type="checkbox"/> fpm <input type="checkbox"/> mps				Ceiling hanger brackets required? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Reversible operation? <input type="checkbox"/> Yes <input type="checkbox"/> No How often?				Underguarding? <input type="checkbox"/> None <input type="checkbox"/> Plastic mesh		
Duty cycle:		Hours per day		<input type="checkbox"/> Solid under-pan <input type="checkbox"/> Expanded metal		
Start/Stop cycle:		Cycles per minute		Quick removal thumbscrews? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Between sideguard width: <input type="checkbox"/> in <input type="checkbox"/> mm (Between sideguard width is 1" wider than belt width)		Frame Construction:				
Belt material required:		<input type="checkbox"/> Stainless Steel <input type="checkbox"/> Mild steel				
Belt Splice: <input type="checkbox"/> laced <input type="checkbox"/> Circle Spiral-Lift configuration		Paint color required: _____				
		Paint type required: <input type="checkbox"/> Std. Quick-dry enamel				
		<input type="checkbox"/> Other (specify): _____				
		(Refer to paint policy attached.)				
Shipping & Receiving						
Does customer have receiving limitations? (i.e., doorway, ceiling, aisle) <input type="checkbox"/> Yes <input type="checkbox"/> No						
If yes, define: _____						
Special truck and shipping instructions: _____						
Comments						
Approved: _____					Date: _____	

