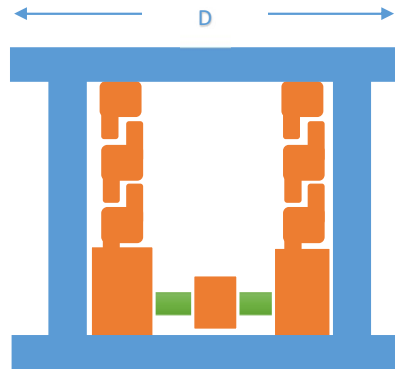
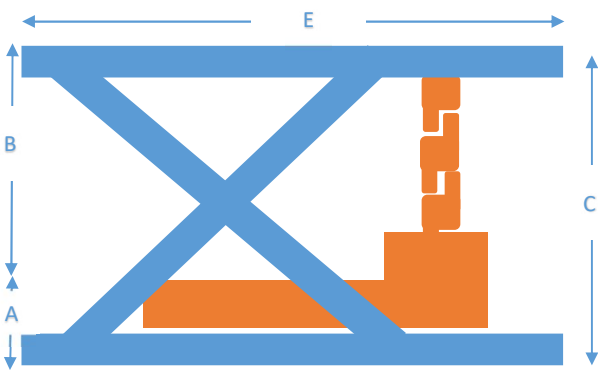


Project Name:	_____	Contact Person:	_____
Address:	_____	Postcode:	_____
Tel:	_____	Fax:	_____
Date:	_____	Person in charge:	_____



Lift series:	_____
HR	_____
VT	_____
VT-L	_____
Capacity (kg)	_____
Loading travel (mm) (B)	_____
Platform size (mm) (DxE)	_____
Low Height (mm) (A)	_____
Top side total Height (E)	_____
Operating Time (sec)	_____
Interval Time (sec)	_____
Operating Mode:	_____
Motor + encoder + sensor	_____
Servo motor + Control panel	_____
Motor + Button	_____
Else	_____
Main Power AC DC (V)	_____
Control AC DC (V)	_____
Eccentric load (kg)	_____
Lifting Frequency h/day Times/day	_____
Operating Process	_____
Dimension of Platform	_____
Speed Requirement (mm/s)	_____
Installation Requirement:	_____
Other requirement:	_____