



# SMARTRISE

## Motor Data Form

### Customer Information

<b>Company Name:</b>	<b>Job Name:</b>
<b>Contact Name:</b>	<b>Phone:</b>
<b>Signature:</b>	<b>Date Signed:</b>

### Job Information

<b>Line Voltage:</b> _____ VAC _____ Phases _____ Hz	<b>Counter Weight Percentage:</b> _____ %
<b>Speed:</b> _____ FPM	<b>Capacity :</b> _____ lbs.

### Machine Information

<input type="checkbox"/> Geared	<input type="checkbox"/> Gearless	<input type="checkbox"/> AC Motor	<input type="checkbox"/> DC Motor
<b>Location:</b> <input type="checkbox"/> Overhead	<input type="checkbox"/> Basement	<b>Machine Brand:</b>	
<b>Mounting:</b> <input type="checkbox"/> Foot	<input type="checkbox"/> Flange	<b>Model:</b>	

### Existing Motor Information:

<b>HP:</b>	<b>Volts:</b>	<b>RPM:</b>	<b>Full Load Amps:</b>
<input type="checkbox"/> Foot	<input type="checkbox"/> Flange	<b>Manufacturer:</b>	<b>Frame Size:</b>