



Smartrise Request for Quote Form

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Date: _____ **Job Name:** _____
Need price by: _____ **Company:** _____
Job Status: Bidding / Won Bid Date: _____ **Branch:** _____
Specifications: Yes No **Contact:** _____
Consultant Name: _____ **Phone:** _____
Email: _____

General Data											
Controller Type	Car Label	Simplex/Group	# of Risers	Stops	Openings (F/R)	Speed (fpm)	Capacity (lbs)	HP	Full Load Amps (FLA)	RPM	Main Line Voltage
<input type="checkbox"/> SRD (DC Drive)											
<input type="checkbox"/> SRA (AC Drive)											
<input type="checkbox"/> SRH (Hydraulic)											
Group #											

Traction:							
Group#	Motor Volts	Machine: Geared / Gearless	Machine: Overhead / Basement / MRL	Machine: Brand & Model	Motor: Retained / Replaced	New motor provided by: Customer / Smartrise	Motor Mounting: Foot / Flange

Hydraulic:					
Group#	Roped Hydro	Single or 3 Phase	Valve Volts (must be 110/115/120v)	Starter: Sprecher+Schuh / Siemens / ATL	Motor Leads
	<input type="checkbox"/> Y <input type="checkbox"/> N				<input type="checkbox"/> 3 <input type="checkbox"/> 6 <input type="checkbox"/> 9 <input type="checkbox"/> 12
	<input type="checkbox"/> Y <input type="checkbox"/> N				<input type="checkbox"/> 3 <input type="checkbox"/> 6 <input type="checkbox"/> 9 <input type="checkbox"/> 12
	<input type="checkbox"/> Y <input type="checkbox"/> N				<input type="checkbox"/> 3 <input type="checkbox"/> 6 <input type="checkbox"/> 9 <input type="checkbox"/> 12

Door Operator(s) brand & model or manual doors: _____ Retiring cam present

Provided by Smartrise:	Provisions:
<input type="checkbox"/> Smart Connect (Inspection Box) <input type="checkbox"/> Load Weighing Device <input type="checkbox"/> Voice Annunciator unit <input type="checkbox"/> Non-Nema 1 cabinet: _____ <input type="checkbox"/> Air-conditioned cabinet <input type="checkbox"/> Arc Flash Protection <input type="checkbox"/> Battery Lowering for hydros <input type="checkbox"/> Hoistway Cabling: _____ ft <input type="checkbox"/> Traveler Cabling: _____ ft	<input type="checkbox"/> Interface to Patient Security <input type="checkbox"/> Interface to Hospital Service <input type="checkbox"/> Interface to EMT Service <input type="checkbox"/> Interface to Earthquake Operation <input type="checkbox"/> Interface to Car Call Security <input type="checkbox"/> Interface to Lobby Control Panel <input type="checkbox"/> Interface to Emergency Power <input type="checkbox"/> Hall Lanterns: via Smartrise Hall Boards <input type="checkbox"/> Hall Lanterns: via CE/Emotive
<input type="checkbox"/> Add'l board for Dual COP <input type="checkbox"/> Regen Kit for tractions <input type="checkbox"/> Iso. Transformer for tractions <input type="checkbox"/> Harmonic Filter for tractions <input type="checkbox"/> EMI/RFI Filter for tractions <input type="checkbox"/> Line Reactor for tractions <input type="checkbox"/> Auto Battery Rescue for tractions <input type="checkbox"/> Manual Battery Rescue for tractions <input type="checkbox"/> Draka Rope Brake for tractions ↳ <input type="checkbox"/> 1/2" Rope <input type="checkbox"/> 5/8" Rope	<input type="checkbox"/> Enclosure Light/GFCI <input type="checkbox"/> Enclosure Fan/Filter <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____

Controller Monitoring System	Special Requests/Options/ Comments
<input type="checkbox"/> SmartView 2.0 Monitoring Quantity <input type="checkbox"/> 7 Inch Viewing Devices <input type="checkbox"/> 11 Inch Viewing Devices <input type="checkbox"/> 19 Inch Viewing Devices <input type="checkbox"/> Access outside of Machine Room (Outside machine room requires cloud subscription through Smartrise)	<u>Integrated Display Systems</u> <input type="checkbox"/> Lift-Net (interface only) <u>Kings III of America</u> <input type="checkbox"/> ORM (interface only)