



## Questioner for belt driven generator- and air compressor-systems

➤ Company data:

Company:	Contact person:
Street / No.	Telephone:
ZIP-Code / City:	e-mail:
Country:	Customer-No.

➤ Vehicle data:

Manufacturer:		No. of cylinders:	
Model:		All Wheel Drive: <input type="checkbox"/> yes <input type="checkbox"/> no	
Year of Production:		Emission class:	€
Engine displacement:	ccm	Steering wheel: <input type="checkbox"/> left <input type="checkbox"/> right	
Engine Power:	kW	Fuel: <input type="checkbox"/> Diesel <input type="checkbox"/> Gasoline	
Engine position: <input type="checkbox"/> transvers <input type="checkbox"/> length		<input type="checkbox"/> Gas (monovalent) <input type="checkbox"/> Gas(bivalent)	
Engine no. / name:		Manufacturer Speed control: <input type="checkbox"/> yes <input type="checkbox"/> no	
Gearbox: <input type="checkbox"/> Stick <input type="checkbox"/> Automatic		Speed control preparation: <input type="checkbox"/> yes <input type="checkbox"/> no	
VIN – Number:			
Aircondition: <input type="checkbox"/> yes <input type="checkbox"/> No		Order vehicle codes:	
Further use of the vehicle:			
Remarks:		Commission:	



➤ Generator System:

Voltage: <input type="checkbox"/> 14 V <input type="checkbox"/> 28 V <input type="checkbox"/> 230 V <input type="checkbox"/> 400 V		Required electric power:		kW
Current with 14 V and 28 V:		A	Frequency:	Hz
El. Power during vehicle operation <input type="checkbox"/> yes <input type="checkbox"/> no			El. Power vehicle operation:	kW
Max. engine speed:		rpm	Cut out engine speed:	rpm
Power box: CAN bus: <input type="checkbox"/> yes <input type="checkbox"/> no				
Required IP-Class:				
Country of deployment:			Vehicle purpose:	
Remarks:				

➤ Air compressor system:

Nominal air volume:		l/min	Nominal air pressure:		barg
Site of installation: <input type="checkbox"/> in the vehicle <input type="checkbox"/> under the vehicle <input type="checkbox"/>					
Material pressure tank: <input type="checkbox"/> Aluminum <input type="checkbox"/> Steel			Air Maintenance Unit: <input type="checkbox"/> yes <input type="checkbox"/> no		
Required storage volume:					liter
Required connections:			Purpose:		
Remarks:					

➤ Quotation Extend

Number of vehicles:		Installation by Fa. Martin: <input type="checkbox"/> yes <input type="checkbox"/> no			
Pick-up service: <input type="checkbox"/> yes <input type="checkbox"/> no		Planned date of realization:			
Date:		Remarks:			
Signature:					