

Automatic Doors

For Quotation Please complete this Quick Quotation Form and Fax to +91-2717-251580 or call: +91-2717-251581/325998

Door Location :

- Exterior Door: Exposure to the Wind : Low Average High
 Interior Door : Use _____

Number of Opening / Closing cycles per Day :

- Used By : Forklift Staff Other (Pl. Specify): _____

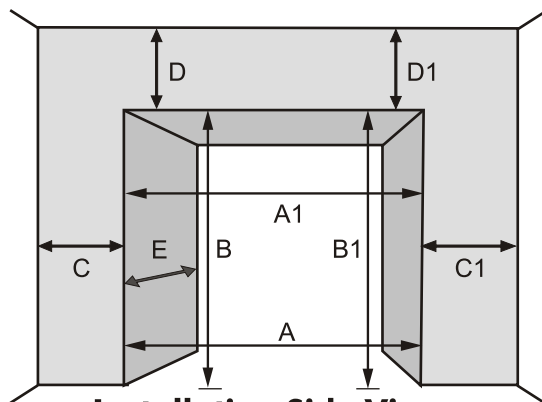
The type of automatic control desired :

- Push Button Pull-cord: Radio Control Magnetic loop
 Photo cell Radar/IR Sensor Dead man safety device

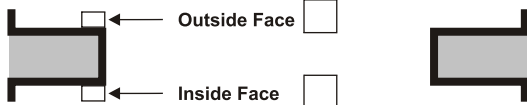
- Price : Ex-works - Packed Delivered Installed

DIMENSIONAL DETAILS

Millimeters



Installation Side View



A	Clear width of opening on Floor Level	
A1	Clear width of opening at Lintel	
B	Clear height of opening LHS	
B1	Clear height of opening RHS	
C	Width of Pillar to which side channel is to be fitted (Clear wall space)	
C1	Width of Pillar to which side channel is to be fitted (Clear wall space)	
D	Distance from Ceiling to underneath Lintel	
D1	Distance from Ceiling to underneath Lintel	
E	Thickness of Pillar	
F	Thickness of Lintel	

Please Indicate Any Specific Requirements :

State Any Obstruction To Door Fixing (window, joist, pipe, etc.)

(Please illustrate on diagram above)

Power Supply :

Voltage available :

Phase :

Distance from opening :

Optional Extras :

- Interlocking Powder Coating
 UPS All Clear PVC
 Other : Specify _____

Your Name : _____

Company : _____

Address : _____

Phone : _____

Fax : _____

Email : _____

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INTERNATIONAL

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