

Sales Department	Name of person in charge		
------------------	--------------------------	--	--

BALAMAN inquiry check sheet

Date of preparation
Receiving No.

Company name			
Address	〒		
Department/section		Person in charge	
TEL		FAX	E-mail

1.Details of work Piece (object to be handled)						Sketch of work piece (if specific clamping or vacuum positions are desired, show them on the sketch.)		
① Shape	Bag	Box	Others	② Object Material	③ Contents			
④ Size	Max. (width)	mm		(Length)	mm		(Height)	mm
	Min. (width)	mm		(Length)	mm		(Height)	mm
⑤ Weight	Max.	kg	Min.	kg	⑥ Type		types	
⑦ Others : (1) Whether work samples can be lent or not if an adhesion test is required for carton box, paper bag or other works (2) If there are many types of works or the shape of the work is complicated, attach lists, diagrams, data, etc.						Yes No		

Details of operation (describe actual operation)	Layout of workplace
	Place where the work is located (height from the floor: mm) Place to transport the work to (height from the floor: mm) How the work is to be placed Horizontal Reversed (angle)

- Method of installation**
Fixed on the floor (concrete thickness mm) Movable on the floor Fixed to the ceiling
Overhead traveling (manual, electric) trolley (traveling mm) Others
- Place of installation**
1st floor 2nd floor Clean room (class) Others
- Carry in and installation**
Forklift Crane Chain block Hoist Others ()
- Supply power source**
Electric (V) Pneumatic (MPa or Kg/cm²) None
- Painting specifications**
Standard color (salvia blue) Specified color () Color of special specification ()
- Attachment to handle** Required Not required
- Requested model** In case you need

<p>9.Working range (important)</p> <p>1) When using a hook, describe the maximum and minimum height of the hook. 2) When some attachment is used, describe the height of the top surface of the work piece.</p>	<p>10.Others Describe any other request</p>
--	--