LAZERARC
BY MOTION INDEX DRIVES



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Robot Transer Unit Application Sheet

COMPANY: _____ **CONTACT:** _____

ADDRESS: _____ **PHONE:** _____

_____ **FAX:** _____

_____ **EMAIL:** _____

TYPE: ⊙OEM ○End User ○Distributor ○Other

APPLICATION INFORMATION:

Transfer Type: ⊙ Floor Mounted
○ Elevated / Inverted

Operations Being Performed: ⊙Material Handling ○Machining ○Other: _____

Material Being Machined (if any): ⊙Metal ○Wood ○Other: _____

Operating Environment: ⊙Clean ○Moderate ○Dirty ○Outside

Machine Description: _____

_____

Travel Length: _____ feet or: _____ meters

Total Weight Being Moved:
(Please include robot, end effector, parts, etc.) _____ lb. or: _____ kilograms

Axis Orientation: ○Horizontal ○Vertical ○Other: _____

Self Lubricator: ○Yes ○No ○Other: _____

Maximum Axis Speed: _____ inches/sec or: _____ meters/sec

Acceleration Time/Rate: _____ seconds or: _____ inches/sec2 or: _____ G

Additional Axis Forces (if any): _____ lbf _____Newtons

Cable Mgt. Mounting: ○ Center ○ Outside ○ Other

Bellows for Linear Guide: ○ Yes ○ No ○ Not Sure ○ Special

Duty Cycle: _____ cycles per hour _____ hours per day

Accuracy Requirements: _____

Backlash Requirements: ○Low ○Zero ⊙Not Sure

Robot Brand Model: _____

Number of Cables through Cable Mgt.System: _____

Largest Diameter of Cable through Cable Mgt. System: _____

Largest Cable minimum bend radius: _____