STATEWIDE
LINEAR BEARINGS

ACTUATOR APPLICATION DATA FORM

CUSTOMER DETAILS

NAME:	CONTACT:
ADDRESS:	PHONE:
DATE:	FAX:

Application requirements

Quantity required _____   Stroke (mm) _____

load (N) _____

Static _____   ☐ Tension   ☐ Compression

Dynamic _____   ☐ Tension   ☐ Compression

Linear speed (mm/s): _____ or time to complete full stroke(s) _____

Duty cycle profile: (eg: extend, dwell 1min, retract, dwell 1 min, 20 cycles per hr, 16hrs per day, 300 days per year)

_____

☐ Running Synchronized   ☐ Running Parallel   ☐ Running Independently

Electrical

Motor Voltage   ☐ 12V   ☐ 24V   ☐ 240V   ☐ Other _____

Limit Switches   ☐ Fixed   ☐ Encoder   ☐ Potentiometer ☐ Adj _____

Controller Required   ☐ Yes   ☐ No

Controller Voltage   ☐ 12V   ☐ 24V   ☐ 240V   ☐ Other _____

IP Rating Required   _____

Drawing attached & Application Details   Yes ☐   No ☐

_____

IMPORTANT INFORMATION

1. Please ensure that the full installation instructions pertaining to the actuator being used is read & employed.
2. The onus is on the user / installer to ensure correct installation.
3. Pay particular attention to:
   a. Preventing side load / moment load forces being applied to the actuator.
   b. Ensure the device you are moving is fully guided other than solely by the actuators.
   c. The clevis mounting is important including the alignment of the mounts (refer instructions) and accurate alignment of the actuators to each other if using more than 1.

Other Comments: