Screw Jack Application Data Form

1. Job Details:

Customer: _____

Contact: _____

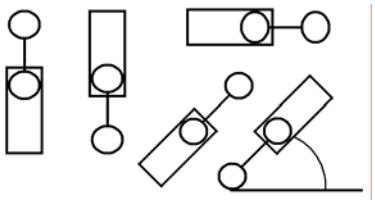
Telephone: _____

Fax: _____

Email: _____

Date: _____

2.Orientation:



Circle Orientation

3.Screw Jack Type:

☐ Translating Screw ☐ Rotating Screw

☐ Upright ☐ Inverted

4. Application Requirements:

Qty of Jacks: _____ Stroke:(mm) _____ Positional Accuracy: (mm) ____

Working Load:(N)_____Total _____Per Screw Jack ☐ Tension ☐Compression

Static Load:(N) _____Total _____Per Screw Jack ☐ Tension ☐Compression

Load Guidance: ☐ Guided ☐ Unguided

Side Load on Lifting Screw: Off centre distance:(mm)_____ Side Load:(N) _____

Linear Speed (mm/min):_____ Life expectancy:_____

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

_____

5. Screw Jack Features:

Mounting Options: Screw End: ☐ Clevis ☐ Thread ☐ Top Plate

☐ Plain ☐ Pilot ☐ Other: _____

Gear Box End: ☐ Plain ☐ Trunnion ☐ Other: _____

Extra Options:

☐Anti Backlash ☐Anti-Rotation ☐Safety Nut ☐Bottom Pipe

☐Motorised ☐Limit Switches ☐ Bellows ☐Other

Specify: _____

6. Application Environment:

Temperature Range: _____ºC → _____ºC

☐ Dusty ☐ Humid ☐Indoor ☐ Outdoor ☐Outdoor Roofed

☐ Seashore ☐ Offshore ☐ Vibration ☐ Dry ☐ Tropic

☐ Other:_____

7. Drawings:

☐ A sketch is attached showing Screw Jack layout

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Auckland	Tel: 09 273 9723	Fax: 09 273 9725	Brisbane	Tel: 07 3274 3388	Fax: 07 3274 3400