Application Data Form

Mail or FAX to:

Warner Electric

Brake and Clutch Application Engineering
449 Gardner Street, South Beloit, Illinois 61080
Phone number: 800-825-9050 • FAX number: 815-389-2582

Date _____

Company _____

Address _____

City _____ State _____ Zip _____

Name _____

Title _____ Phone (_____)_____

Application: ☐ New ☐ Existing

Torque required: _____ oz. in. _____ lb. in. _____ lb. ft.

☐ Static ☐ Dynamic

Prime mover:

Frame size _____

H.P. _____

Speed of:

Clutch/Brake _____

Reducer ratio _____

Belt/Chain ratio _____

Linear velocity _____

Load inertia to be accelerated and/or decelerated (WR^2):

State units _____

How is clutch/brake to be controlled?

On/off _____ Torque adjust _____ OEX _____

Switching method?

PLC _____ Relay _____ Sensor _____

System friction: _____ lb. in. _____oz. in.

Distant moved per cycle: _____ degrees

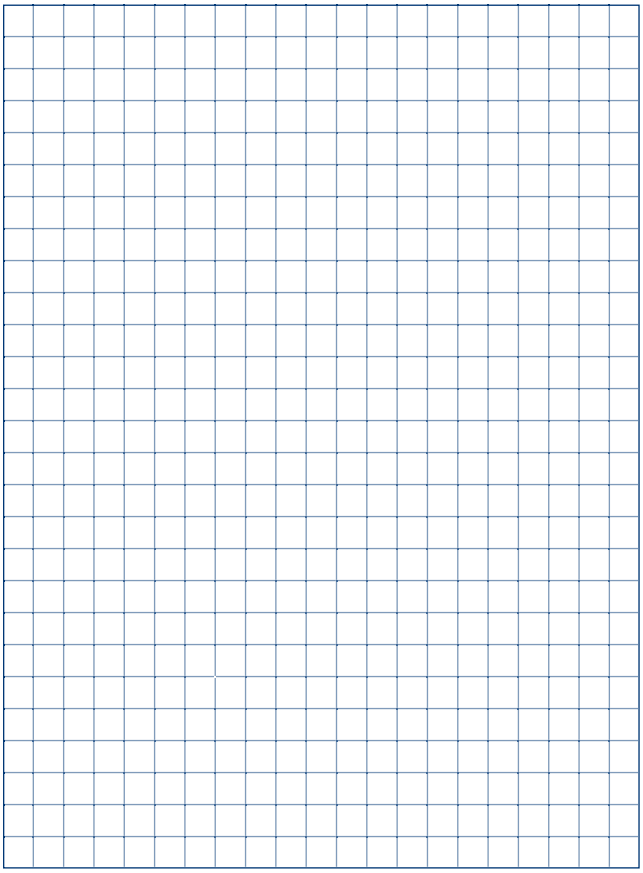
Total single cycle time: _____

Maximum cycle rate:

Per min. _____ Per hour _____ Per day _____

Desired life:

Cycles _____ Months _____ Years _____

Environmental ambient temp:_____°F

Additional comments about application or sketch: