



QUOTE FORM FOR EX MOTORS

* Indicates a required field
• In box is standard feature

Section A Contact Information

*Your Name
*Company Name
*Address

*City
*State
*Phone
Fax
*Email
*Sales Area

*Zip

Section B Project Information

Customer Reference
(for project) Number

Project Name

Location

Project
Due Date

Section C Motor Information

*Replacement Motor No Yes If Yes,
Serial#

*Quantity

*Motor Protection

*Inverter Use No Yes

* If you select frequency range enter Hz min/max

*Phase
*KW
*Pole number

*Hertz 50 60

Section C
Motor Information
 (cont'd)

*Voltage	230/400 (63 to 112) 400/690 (132 to 315) standard solution		
	Other (specify)		
*IP Code			*Frame
*Mounting	Horizontal	Vertical	*If vertical choose from the drop down
* Motor Mounting			Other motor mounting
*Bearing Type	Specify other bearing type here		
*Load			*Efficiency Level
*Service Factor		1.00 is default	
Altitude (Feet/Meter)		i.e. 3300/1000	
*Application			*Area Classification
*Zone			*Group
*Temperature Code			
*Required Certification			If other specify here
Enclosure	IC410 - TENV IC411 - TEFC IC416 - TEBC IC418 - TEAO - airflow		
Enclosure Finish			
*Terminal Box Mounting			
Terminals	6 Terminals	Other / Enter Terminals	

Section D
Additional Requirements

Auxiliary Terminal
Box

Thermal Protection

Space Heaters yes

Voltage / Phase

Brake

Voltage / Phase

Special Ambient
Temp.

40° C is our standard

Special Requirements
/Notes

Urgent call me right away

To Submit Quote:

1. Select **Save As** from the file menu.
2. Name the file with your project number or project name.
3. Email your PDF to your Sales Representative or sales@vem.fi .