

# Selection Form Turnover Machine

Requested Date \_\_\_\_\_

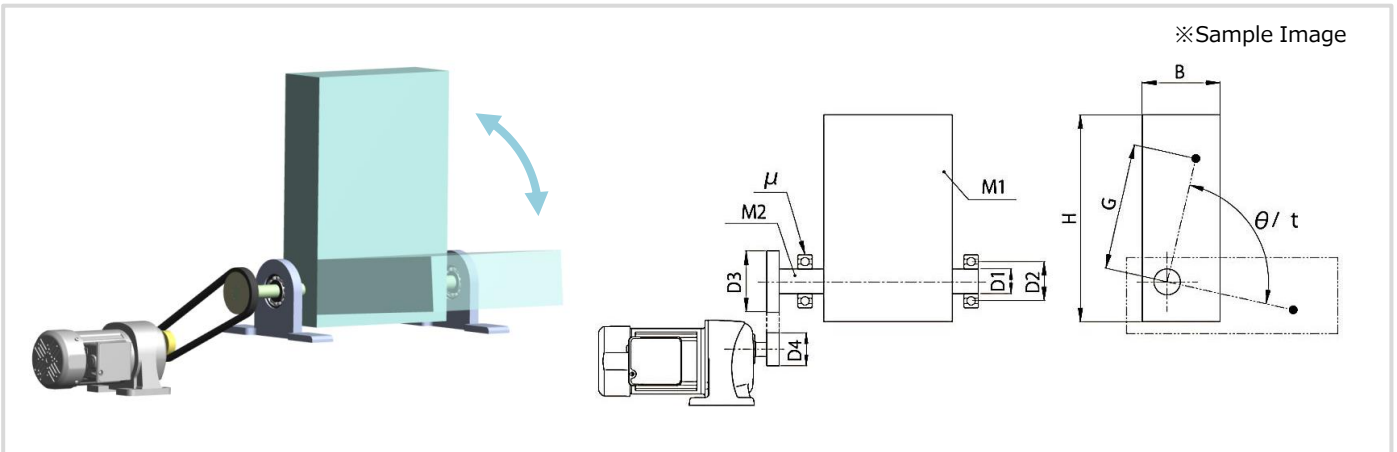
Please check the corresponding item in

## Select gearmotor series ※If you are unable to make a selection, please leave it blank.

- Induction Gearmotor(MID series / MINI series)   
  IPM Gearmotor(Speed Control Type)  
 Battery-powered Type Gearmotor(DC12V/24V/48V)   
  Requested Model { \_\_\_\_\_ }  
※If you already know the mode number, please enter that in { \_\_\_\_\_ }.

## Output shaft type selection ※If you are unable to make a selection, please leave it blank.

- Parallel Shaft (G3, G type)   
  Right Angle Shaft (H2, H type)   
  Hollow Shaft (FS, F2, F3 type)   
  Solid Shaft (FF, F2, F3 type)



## Operating Condition ※Leave the field blank if you are not sure

- Rotating Angle of the Work     $\theta =$   °
- Rotating Time of the Work     $t =$   seconds
- Weight of the Work     $M1 =$   kg
- Weight of the rotating shaft     $M2 =$   kg
- Outer diameter of the rotating shaft     $D1 =$   mm
- Pitch circle diameter of the rolling element bearing     $D2 =$   mm
- P.C.D. of Driven Side Sprocket     $D3 =$   mm  
(Timing Pulley, Gear) ※Not required for direct coupling
- P.C.D. of Drive Side Sprocket     $D4 =$   mm  
(Timing Pulley, Gear) ※Not required for direct coupling
- Outer dimension of the Work(depth)     $H =$   mm
- Outer dimension of the Work (width)     $B =$   mm
- Gravity center of the Work     $G =$   mm
- Friction Coefficient of the Bearing     $\mu =$
- Repeated Stopping Accuracy ※Enter only if necessary.  
 $\pm$   mm (rotating angle equivalent)
- Power   
  3-phase   
  1-phase   
  Battery(DC)  
 V     Hz
- Start/Stop Frequency  
 Times /  Minute  Hour  Day
- Brake   
  with   
  without
- Inverter   
  with   
  without  
※Check this box only for induction gearmotors.
- Other operating conditions such as cycle time

## Customer Information

CS center Technical Support Desk  
E-mail : tech-cs@nissei-gtr.co.jp

Company Name _____	Address _____
Department _____	_____
Job Title _____	Phone Number _____
Name _____	FAX Number _____
	E-mail _____
Purpose of Selection <input type="checkbox"/> New Facility <input type="checkbox"/> Replacement <input type="checkbox"/> Change model <input type="checkbox"/> Others{ _____ }	
Type of Industry <input type="checkbox"/> Conveyor <input type="checkbox"/> Food Processing Machine <input type="checkbox"/> Machine for Agriculture or Fisheries	
<input type="checkbox"/> Tooling Machine <input type="checkbox"/> Packaging Machine <input type="checkbox"/> Printing·Paper Converting Machine	
<input type="checkbox"/> Special Machine <input type="checkbox"/> Construction Machine <input type="checkbox"/> Electrical and Electric Equipment	
<input type="checkbox"/> Medical Equipment <input type="checkbox"/> Design Office <input type="checkbox"/> Trading Company <input type="checkbox"/> Others{ _____ }	

**Notice** Please note that we may send you separate message after registering your information we have obtained through customer inquiries.  
Please let us know anytime if you want us to delete your information from our system.