



ASHLAND ELECTRIC PRODUCTS INC.

10 Industrial Way, Rochester NH 03867-4296
Phone: 603-335-1100 Fax: 603-335-1120 e-mail: sales@ashlandelectric.com
www.ashlandelectric.com

AIR MOVER INFORMATION FORM:

ITEMS WITH * MUST BE PROVIDED.
PLEASE COMPLETE THIS FORM AS THOROUGHLY AND ACCURATELY AS POSSIBLE.

*DATE: _____ *CONTACT: _____

*COMPANY: _____ *TITLE: _____

*ADDRESS: _____ *PHONE NUMBER: _____

*CITY, STATE, ZIP: _____

*COUNTRY: _____

*EMAIL: _____ FAX: _____

PROGRAM / PLATFORM: _____

*QUANTITY / SYSTEM: _____ *POTENTIAL (Total): _____

*PROTOTYPE QUANTITY: _____ PROTOTYPE DATE REQUIRED: _____

PRODUCTION QUANTITIES: _____ 1ST PRODUCTION DELIVERY: _____

1ST YEAR: _____ 2ND YEAR: _____ 3RD YEAR: _____ PROJECTED YEARS _____

*FLIGHT CRITICAL (check one): YES _____ NO _____

AIR MOVER TECHNICAL REQUIREMENTS:

INCLUDE APPLICABLE TOLERANCES.

SPECIFICATION OR DRAWING AVAILABLE: YES _____ NO _____

*FLOW RATE (CFM, lb/sec, etc.): _____ *STATIC PRESSURE (in. wg): _____

AIR DENSITY (lb/ft³): _____ SPEED (RPM): _____

*ELECTRICAL INPUT	VOLTAGE	AC or DC	NUMBER OF PHASES	FREQUENCY (Hertz)

NOTE: Three phase AC voltages are assumed line-to-line.

MAX. RUN CURRENT (Amps): _____ MAX. INRUSH CURRENT (Amps): _____

MAX. POWER (Watts): _____

SIZE ENVELOPE (inches) L x W x H or DIAMETER x LENGTH: _____

AMBIENT TEMPERATURE RANGE (°F)	
OPERATING	
NON-OPERATING	

ADDITIONAL INFORMATION OR NOTES: _____