

Questionnaire | Specification Data

Inductive Power Transfer – IPT®



Customer Data

Company: _____ Customer-No.: _____
 Address: _____
 Contact person: _____
 Phone: _____ Fax: _____ E-Mail: _____




Reference Data

Project name / Reference: _____
 Project schedule: Delivery: _____ **If a detailed time schedule is available, please attach**

Application

- | | |
|--|---|
| <input type="checkbox"/> Amusement Ride | <input type="checkbox"/> Electric Monorail System (EMS) |
| <input type="checkbox"/> Automated Guided Vehicle (AGV) | <input type="checkbox"/> Skillet System |
| <input type="checkbox"/> Elevator | <input type="checkbox"/> Sorter |
| <input type="checkbox"/> Transfer car or Rail Guided Vehicle (RGV) | <input type="checkbox"/> Other (please specify) _____ |

Possible Arrangement / Integration

-  **Floor system**
 (cables in the ground, flat pickup)
 Please specify floor quality _____
-  **Floor system**
 (cables on floor, flat pickup)
 Please specify floor quality _____
-  **Rail system**
 (cable holders, E-shaped pickup)
 Please add drawing of track profile and arrangement

System Layout

- Total length of system [m]: _____
- Number of independently powered segments (e.g. for maintenance area): _____
- Number of switches, if any: _____
- Number of lifts (applicable only for EMS): _____
- Safety zones in front of switches or lifts (applicable only for EMS): Yes No

Please specify separately if there are multiple segments / E-Stop zones. Please add a system layout or sketch (pdf, dwg, dxf) with marked locations for cabinets if available

Power requirements of a single vehicle

Continuous power per vehicle [kW]: _____
 Peak power per vehicle [kW]: _____
 Duty cycle [%]: _____
 Speed of vehicle [m/s]: _____
 Type of on board consumers:
 Control (PLC) + Sensors Power demand max. [kW]: _____
 Electric rotary drive Power demand max. [kW]: _____
 Lift and other auxiliary drives Power demand max. [kW]: _____
 Others (please specify): Power demand max. [kW]: _____

Please add a sketch of the load profile if available

Vehicle Dimensions and distribution of vehicles

- Length x Width x Height [mm]: _____
 - Weight [kg]: _____
- If there are defined locations for IPT® components please add drawings**
- Number of vehicles in total on system: _____
 - Max. number of vehicles allowed per segment/E-Stop zone: _____
 - Utilisation factor (simultaneous driving of vehicles) [%]: _____
 - Desired output voltage on vehicle:
 560 V DC 24 V DC at: _____ [A]
 Other (please specify): _____

Mains voltage

- 3x 400 V AC, 50 Hz + PE Other (please specify)
 3x 415 V AC, 50 Hz + PE voltage tolerance if > 10%: _____
 3x 480 V AC 60 Hz + PE

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Operating time of the system

- Operation cycles per hour: _____

- Hours per day: _____
- Days per month: _____
- Months per year: _____

Environmental conditions

- Temperature range [°C]: _____
- Relative humidity range [%]: _____
- Indoor Outdoor
- Special conditions (e.g. chemicals, water, dust etc.): _____

Metals in close proximity

IPT® is an inductive system producing a magnetic field. Therefore an area free of metals, especially ferro-magnetic materials around the IPT® cables should be maintained.

Material of floor, reinforcements, etc., rails: _____

Type of vehicle guidance desired (if applicable)

- Rail guided
- Slot guided
- Inductively guided (iDAT Guidance)
- Other (please specify): _____
Tolerances while driving: _____

Type of vehicle positioning (if applicable)

- Transponders (provided by _____)
- Bar code positioning (provided by _____)
- Inductive positioning [iDAT Position] (by Conductix-Wampfler)
- Other (please specify): _____

Data communication (if applicable)

- | | |
|---|---|
| Which type of data communication is considered? | If not, is inductive data communication (iDAT) desired? |
| <input type="checkbox"/> Wireless LAN (provided by _____) | <input type="checkbox"/> Data rate [kbps]: _____ |
| <input type="checkbox"/> Radio (provided by _____) | <input type="checkbox"/> Interface RS232 |
| <input type="checkbox"/> Infrared (provided by _____) | <input type="checkbox"/> Interface RS485 |
| <input type="checkbox"/> Other services (_____) | <input type="checkbox"/> Type of field bus: _____ |

Services desired

- | | | |
|--|--|--|
| <input type="checkbox"/> Technical Advisory | <input type="checkbox"/> Quotation | <input type="checkbox"/> Documentation |
| <input type="checkbox"/> Installation by Conductix-Wampfler | <input type="checkbox"/> Supervision of third party installation | <input type="checkbox"/> Other (please specify): _____ |
| <input type="checkbox"/> Commissioning by Conductix-Wampfler | <input type="checkbox"/> Operator Training by Conductix-Wampfler | |

- Specific regulations/standards/rules to consider? _____

- Installation equipment provided? _____

- Installation equipment to quote beyond IPT®-specific equipment? _____

- Unhindered access to installation site is: given not given, because of: _____

- Packaging requirements: _____

- Comments: _____

