

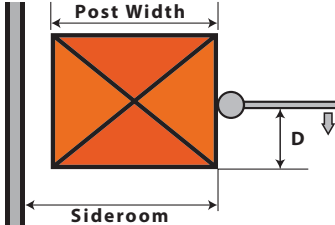
Contact Name:		Today's Date:	
Business Name:		Install Date:	
Email Address:		Mobile/Phone:	
Address:			

> Please provide as much information below as possible <

USAGE: Residential Commercial Industrial Other

Expected number of cycles per day		State	Suburb
Estimated number of users			

SWING GATE(S) INFORMATION

Gate Leaf Width				Gate Leaf Height			
Double		Single		Gate(s) Leaf Weight			
Wind Loading =	Yes			Physical Gate Stops =	Open		
	No				Closed		
	%						
Opening Angle	Gate 1 =				Post Width =		
	Gate 2 =				Sideroom =		
Construction Material		Timber	Steel	Other	D =		
	Post =						
	Gate =						

For the ideal operation and correct geometry, please provide D and Sideroom

> Please tick your preferred voltage, take into consideration the options available for each <

24VDC		240V		
Battery backup		UPS		
Solar power		Three phase		
Separate Transformer	<10m	10-20m	20-50m	100m

> Please circle any accessories you will require <

Keypad(s)	Lock(s)	PE Beams	Edge Sensor	Loop detector(s)
Encoder	Push buttons	Key switch(es)	Transmitters	Other

Special requirements and additional information:

Thank you for your time!
Please send this to us and we will be in touch as soon as possible.

Office: (03) 9527 9955 • sales@labayside.com.au
Address: Level 1, 12 William Street, Balaclava, 3183