

## Elektrolift Magnet Quote Request

| Company:   | Quote Required Date:                         |
|--|--|
| Address:   | Contact Person:                              |
| City, State, ZIP:  | Contact Email:                               |
| Phone/Cell:  | Email Completed RFQ to: magsales@dingsco.com |
| Date Equipment Required by:                                |  |
| Information for Lifting Applications                       |  |
| Maximum Plate Thickness: inches                            |  |
| Maximum Plate Length: inches                               | Thickness                                    |
| Maximum Plate Width:inches                                 | Width  |
| Maximum Plate Weight:lbs                                   | Width  |
| Description of Largest and Smallest Material to be Lifted: |  |
|  |  |
| Supply Requirements: Volts:                                | Phase: Cycles Per Second (Hz):               |
| Special Requirements:                                      |  |