

DRIVE DESIGN REQUEST

Company Name:	
Contact Name:	
Phone:	
Fax:	
Email:	
•	many fields as possible. We will contact you via the details given above

if we require further information.

Driver Unit

Driver Unit:	Driver power (kW):	
Driver Speed (rpm):	Pulley Diameter (mm):	
Type of start:		

Driven Unit

				
Driven Unit:		Daily run time (hrs):		
No. of starts/day:		Req. driven speed (rpm):		
Pulley Diameter (mm):		Req. drive ratio:		

Other Conditions

Pref. belt section:	Pref. service factor:	
Required centres (mm):	Belt length (mm):	
Special conditions		

We will process your design request as soon as possible upon receipt. Either email us the form (use the "submit" button below), or print the form and fax.

SUBMIT FORM



TRANZ CORPORATION LIMITED

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