Inquiry Sheet

E-MAIL overseas-div@freebear.co.jp

Please copy this sheet and fill out the necessary items, and then send it to us by E-MAIL.

							Filling o	date	(month) (day)	(ye	ar)	
Your company name								Pla	ant name	•			
Ad	dress	₹											
Filled by						Department							
TEL. FAX					FAX.	K. e-mail							
	Please fill in						nts under c	onsi	deration.				
Conveyance object	Overall and conveying surface shape												
	Size		Мах	c.: Width () mm x	mm x Depth () mm x Height () mm Weig					ht ()kg	
			Min	.: Width () mm x [Depth () mm :	х Не	ight () mm Weigh	nt ()kg	
	Rust-proof		□Y€	es 🗆 No	Dust-proof	□ Yes	□No	Temp	perature	☐ Room temper☐ Operating temper		℃~ ℃)	
	Environment		□N	ormal (indoor	′) 🗌 Outdo	or 🗆 CI	ean room		Other ()	
	Conveying surface material									Uneven load	☐ Ye	s 🗌 No	
	Budget					Impleme	ntation time	е					
Selection of freebear table	1	Fill ir	Fill in the table size.										
		W()n	nm × D()mm						
	2	Selec	Select whether to have the freebear to be mounted chosen by our company or by yourself. For the latter, please fill in the model.										
			☐ By our company ☐ By yourself() ※Example:(C-8Y)										
	3	Sele	Select the mounting method of the freebears, and fill in the pitch.										
			☐ Parallel() Pitch ☐ Plover() Pitch ☐ By our company Select the type of the table. If you select types other than FT, select the location of the handle (air supply port										
	4	Seled	ct the ty	pe of the table.	If you select t	types other	than FT, se	lect th	e location				
			FT	□HFT	□AFT	□HRT	□ART	-	Di J	D2 Select the local the handle (air from the left fig.	inlet)		
		Selec	Select whether to use the fall-preventing guides or not. Please circle the Fixed, Removable, or No for each mounting location.										
	5		☐ Yes ☐ W1 (Fixed		xed, Remova	, Removable, No) □ D1			1 (Fixed, Removable, No)				
			No	☐ W2 (Fixed, Removable, No) ☐ D2 (Fixed, Removable, No) ☐ ₩						Wi			
	6	Sele	Select whether to use the rack or not. If you select "Yes", select the type of the rack and fill in the size.							e size.			
			Yes	☐ Fixed rad	ck Heigh	t from con	from conveying surface to the floor H(
			No		□ Mo	☐ Movable type Stroke (mm~							
		□ No		☐ Truck	□ Fix	☐ Fixed type Height from conveying surface to the floor H(
		Select the type of the adjusters or casters. Please circle the material for the casters in ().											
	7		☐ Adjuster — ☐ ☐ With fixing part ☐ Caster (Rubber, Polyurethane, Nylon) — ☐ ☐ With brake ☐ Without brake										
		Select whether to specify the coating color or not. If you select "Yes", please fill in the specified color.											
	8	☐ Yes — Munsell color() ☐ No — Standard color of the freebear (Munsell color 5G4/8 Green)											

