

Shaft Coupling Questionnaire



Contact Details

Contact Name :		Company Name :	
Phone :		Address :	
Fax :			
Email :			

Replacement Coupling Details

Coupling Type	<input type="checkbox"/> Elastic	<input type="checkbox"/> Tyre	<input type="checkbox"/> Grid	<input type="checkbox"/> Disc	<input type="checkbox"/> HTC	<input type="checkbox"/> Gear	<input type="checkbox"/> Jaw
	<input type="checkbox"/> Fluid	<input type="checkbox"/> Magnetic Clutch		<input type="checkbox"/> Torque Limiter		<input type="checkbox"/> Other :	
Coupling Model :		Coupling Size:		Shaft Dia :			
Other details :							

New Application

Application :	

Drive Details	
<input type="checkbox"/> Motor	<input type="checkbox"/> Engine
kW :	
Speed :	
Demand Torque :	

Operating Conditions	
Hours Operation :	
Starts/Hr :	
Required Life :	

Configuration	
<input type="checkbox"/> Taperlock	<input type="checkbox"/> Bore+Key
Drive Shaft Dia :	
Driven Shaft Dia :	

Environmental Conditions	
<input type="checkbox"/> Corrosive	<input type="checkbox"/> Explosive
Other :	

Misalignment	
Angular :	
Parallel :	
Axial :	

Special details	
<input type="checkbox"/> zero backlash required	
<input type="checkbox"/> radial removal of elements required	
<input type="checkbox"/> lubrication acceptable	
allowable diameter :	