Autonomous Electric Wheel Project

To facilitate your study, please complete this page and send it to our technical department.

Company:

Address:

Contact:

Phone:

Email:

Description of your application (schematic diagram):

Brief description of its use:

Total weight to be moved: _____kg

Vehicle dimensions (L * w * h): _____mm

Position of the centre of gravity: _____

Diameter and number of idle wheels: _____

Diameter and number of fixed wheels: _____

Use of electric wheels to support the load (weight)? YES / NO

Positioning of the load-bearing wheels (to be transferred to the above diagram of principle)

_____

_____

Height between ground and low point of the chassis available: _____mm

Nature of the floor: _____

Slope crossing? _____

(if yes angle and desired level of assistance)

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Overcoming obstacles?: _____

(sidewalks, door sills,... if yes, height)

With driver on board? OUI / NON

Operating cycle (number of system starts/stops over a full shift of use):

_____

_____

Distance travelled between each departure stop: _____m

Total distance travelled per shift: _____m

Autonomy expected: _____h

Pull-out force without electric wheel: _____N

Push force without electric wheel: _____N

Pull-out force with the electric wheel: _____N

Push force with electric wheel: _____N

Forward and reverse speed: Fwd: _____km/h

Re.: _____km/h

Acceleration type: Fast / Medium / Progressive

At rest: Completely free wheel

Braked wheel (electrically)

Type of control required: _____

Desired protection rating (IP): _____

Environment (water projection, humidity, temperature, etc.): _____

_____

Comments:

_____

_____

_____

_____

_____

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