ALLIANCE
ELEVATOR SOLUTIONS

Order Form

Project Name: _____

Project Address: _____

_____

Type: ☐ MRL ☐ Traction ☐ Hydraulic & Type: _____

Capacity: _____

Platform (Width x Depth): _____

Hoistway (Width x Depth): _____

Car Speed: _____

Seismic Zone: _____

Power Supply: ☐ 200–208V, 3Ph, 60 Hz

☐ 230–240V, 3Ph, 60 Hz

☐ 460–480V, 3Ph, 60 Hz

Additional Features: _____

_____

_____

_____

☐ New Construction ☐ Modernization

Wall Thickness: _____ Material: _____

Entrance Finish: _____

Door Operator: ☐ GAL MONXT (Linear) ☐ GAL MOVFR (Harmonic)

Door Speed (circle): SSCO, SSSO, 2SSO Door Hand: _____

Door Size: _____

Cab Height: _____

Cab Interiors: _____

_____

_____

_____

ADDITIONAL COP OPTIONS: ☐ None ☐ Aux ☐ Swing

Signal Fixtures: (Quantity & Location)

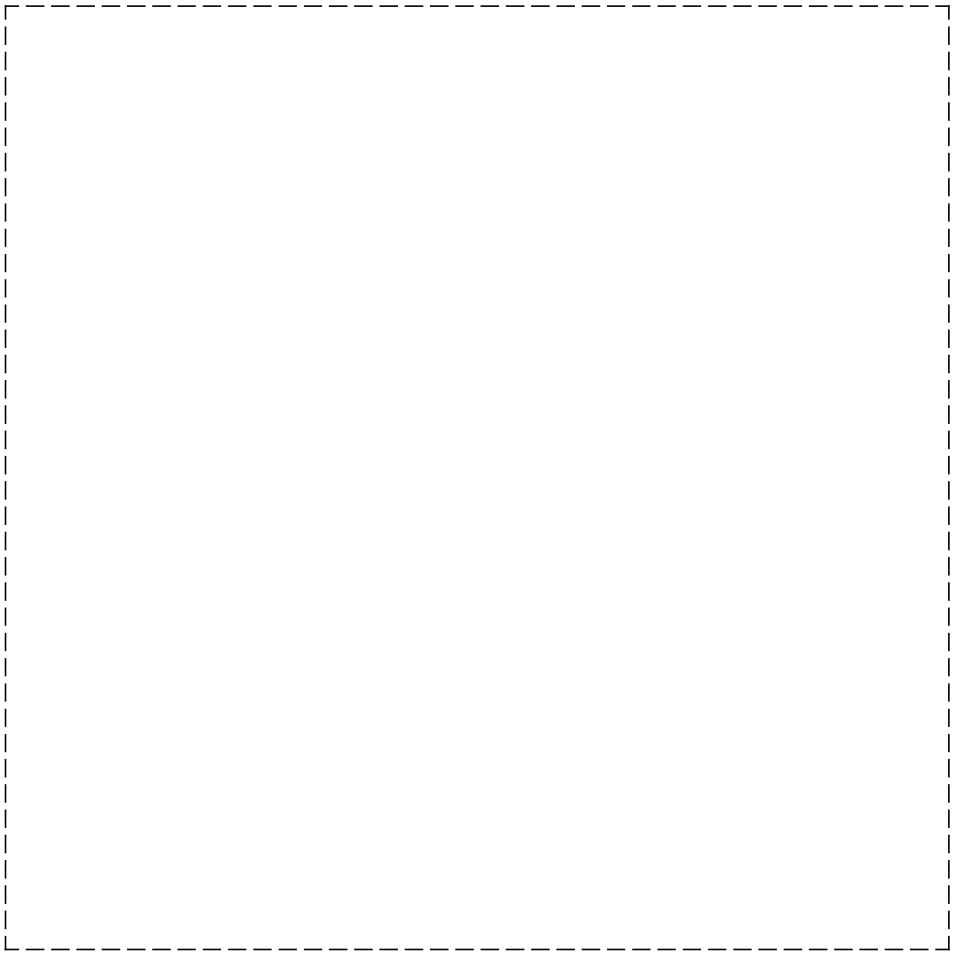
Car Lantern(s): _____

Hall Lantern(s): _____

Hall PI w/ Lantern: _____

Controller Mfg: _____

Draw your car and machine room!
(Don't forget to include dimension)



	TOTAL TRAVEL		
	OVERHEAD		
20th floor			
10th floor			
1st floor			
	PIT DEPTH		
	FRONT LABELS	REAR LABELS	FLOOR TO FLOOR HEIGHTS