

# ALLIANCE

## ELEVATOR SOLUTIONS

# Order Form

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

New Construction     Modernization     Existing Hoistway

Machine Room:  Reference included architectural prints

Use Minimum Size

Adjacent to hoistway

Located on floor: \_\_\_\_\_

Remote from hoistway \_\_\_\_\_ft

Power Supply:  200–208V, 3Ph, 60 Hz

230–240V, 3Ph, 60 Hz

460–480V, 3Ph, 60 Hz

Hoistway Size (WxD): \_\_\_\_\_

Hoistway Wall Thickness: \_\_\_\_\_ Material: \_\_\_\_\_

Seismic Zone: \_\_\_\_\_

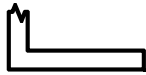
Expected Material Date: \_\_\_\_\_

Material Shipping Address: \_\_\_\_\_

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_

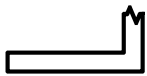
Front Opening



Right Hand

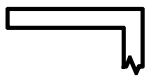


Center Opening



Left Hand

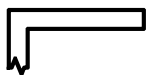
Rear Opening  
(if applicable)



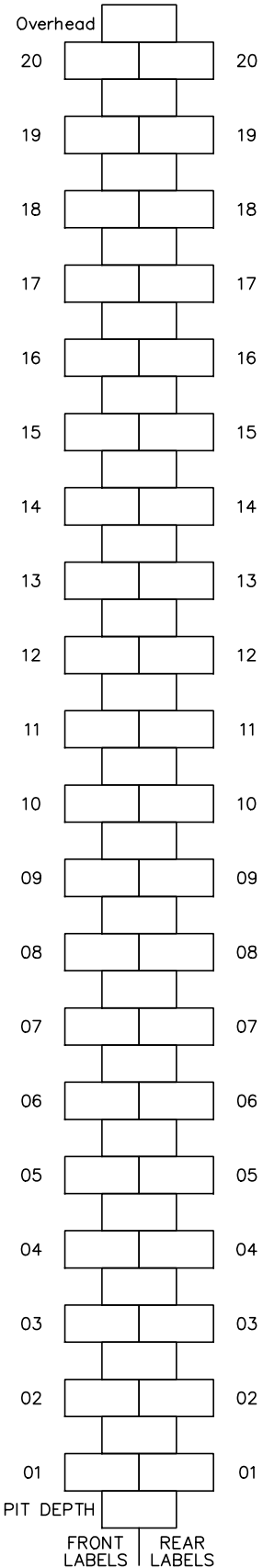
Right Hand



Center Opening



Left Hand



Primary Egress: \_\_\_\_\_

NOTE: Projects that are canceled by the customer after the preliminary / submittal drawings have been released are subject to a 10% cancellation fee.