

## **FIRE SERVICE**

Company Name																								
Address																								
City															State Zip									
Date	Date Company Rep.																							
Phone							Се	:II _				Fax												
E-mail													E-fax											
	MODEL 712																							
Building Name																								
Controller Type												Is Controller Micro Processor ☐ Yes ☐ No												
											If yes Provide Install Date													
No. of Cars												Is Job Print Available? ☐ Yes ☐ No												
Do you require a digital set of final prints?												If yes, please choose how you wish to receive the .pdf file:												
☐ Yes ☐ I	☐ Link to download ☐ Disc																							
☐ Simplex		Duplex								Tr	riplex Group													
What year/code upgrading to?  No. of F											loors? □ Otis Touch Tube □ Mechanical Butto													
Floor Markings																								
Landings	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	5 16	17	18	19	20	21			
Normal Re	Normal Return Landing													Alternate Return Landing										
Number of cars with rear doors? Is it a walk-through? ☐ Yes ☐ No																								
Is door detector present? ☐ Yes ☐ No ☐ Future																								
Type of Do	oor	Орє	erato	or?								I AC				otis 69 Reacti			Resi	stanc	e?			
Is Emergency Power present? ☐ Yes ☐ No ☐ Manual ☐ Auto																								
For Otis C	om	pan	y – A	Are y	/ou ι	usin	g Ot	is K	(ey s	switc	:h? □	l Ye	s 🔲 l	No										
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COMPLETE FORM AND FAX TO 954-933-4185
OR SAVE THE FILE AND SEND AS AN ATTACHMENT TO SALES@ELECTRODYN.COM