



ROTARY SYSTEMS INC

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SLIP RING APPLICATIONS FORM

Company Name: _____ Date: _____
 Address: _____ P.O. Box: _____
 City: _____ State: _____ Zip Code: _____
 Customer Contact: _____ Required Delivery Date: _____
 Telephone: _____ Ext: _____
 Email: _____

Mechanical Specifications

Total # of Circuits: _____ Max Rotational Speed (RPM): _____
 Type of Assembly: _____ Sealing (if required): _____
 Package w/ Bearings: _____ Life (# of revolutions): _____
 Separate w/o bearings: _____ Connection Type:
 Dimensions: _____ Flying Leads:
 Weight (if a concern): _____ Soldier Pin Terminals:
 Quantity Needed: _____ Threaded Terminal Studs:
 Connectors:

Environmental Conditions (if applicable)

Operating Temp. Range: _____ Installation Position:
 Shock/Vibration _____ Over the Shaft
 Any Abnormal Conditions: _____ Horizontal
 Vertical

Electrical Specifications

<p><u>Power</u></p> <p># of Power Circuits: _____</p> <p>Amps/Voltage: _____</p> <p><u>Signal</u></p> <p># of Signal Circuits: _____</p> <p>Amps/Voltage: _____</p> <p><u>Video</u></p> <p># of Video Circuits: _____</p> <p>Amps/Voltage: _____</p>	<p><u>Data</u></p> <p># of Data Circuits: _____</p> <p>Amps:Voltage: _____</p> <p><u>Thermocouple</u></p> <p># of Thermocouple Circuits: _____</p> <p>Amps/Voltage: _____</p> <p><u>Other</u></p> <p>Specify Type: _____</p> <p># of Other Circuits: _____</p> <p>Amps/Voltage: _____</p>
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