

Monitor Controls

QUOTE SHEETS

To: Monitor Controls

Attention: _____

e-mail: fixtures@januselevator.com

Phone: 631-543-4334

Fax: 631-543-4372

Submitted by: _____

Company: _____

Phone: _____

Fax: _____

e-mail: _____

Project Name or Address : _____

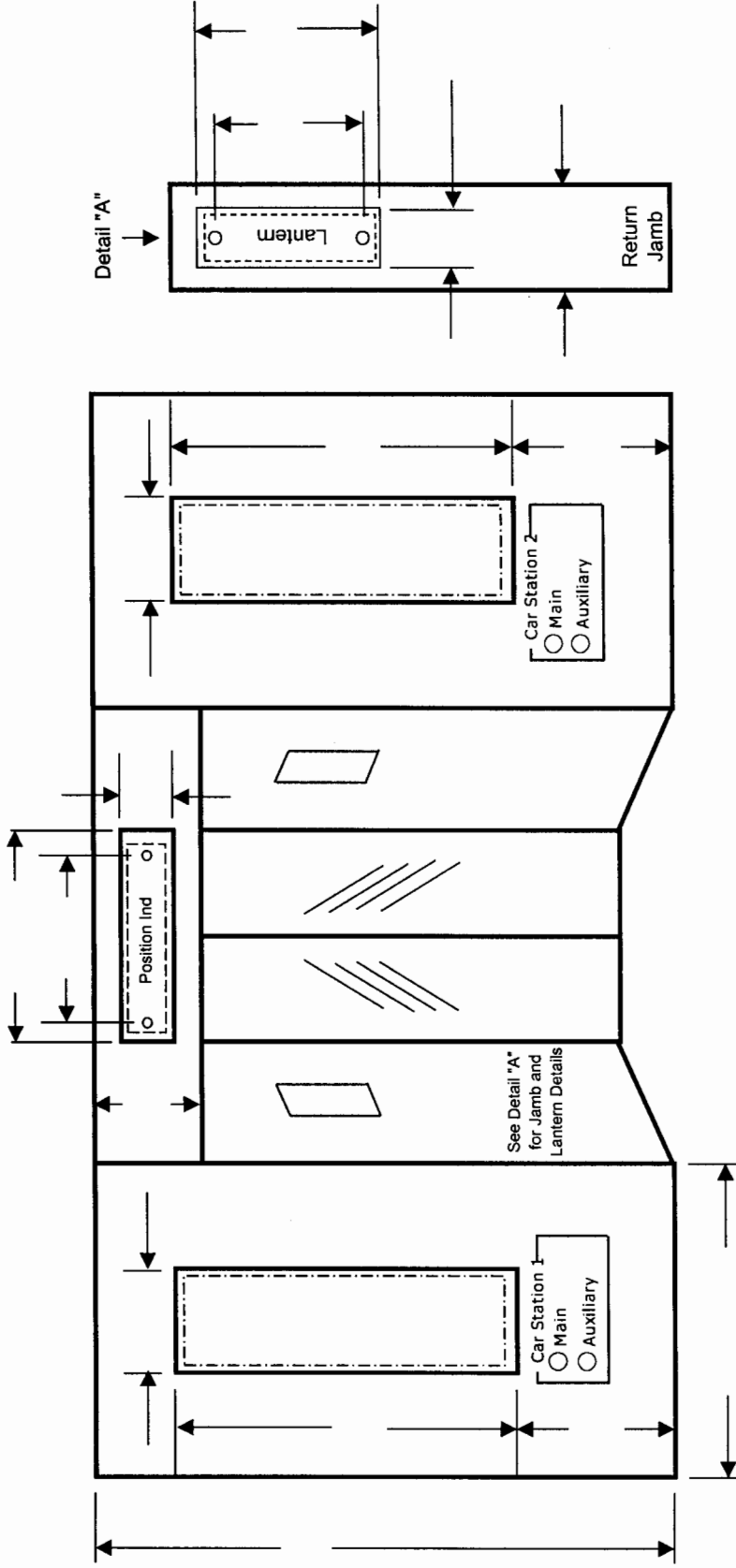
Date Quote Required: _____

125 RICEFIELD LANE HAUPPAUGE, NY 11788 (631) 543-4334 FAX (631) 543-4372

Existing Car Conditions



This drawing is not to scale



Job address: _____

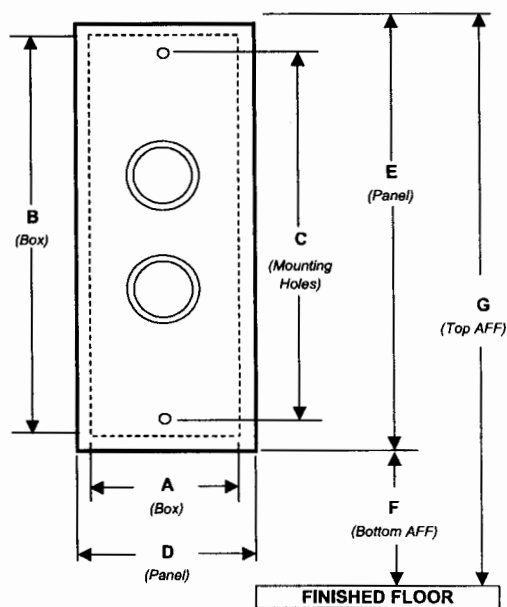
Car(s): _____

Box Sizes:	Width	Height	Depth
Car Station - Main			
Car Station - Aux			
Car Position Indicator			
Car Lanterns			

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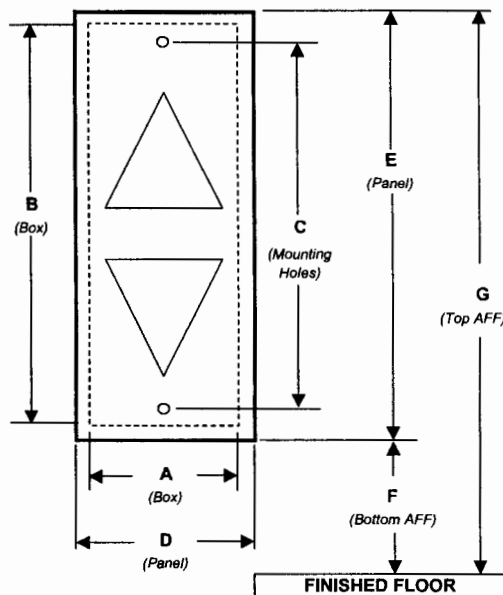
A HALMA COMPANY

Existing Hall Station Conditions



Car(s)							
Floor	A	B	C	D	E	F	G

Existing Hall Lantern Conditions



Car(s)							
Floor	A	B	C	D	E	F	G

Job Address: _____

Drawings not to scale

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Customer Name _____
 Job Address _____
 Contact Name _____



Car Station

For Car no's: _____

	Total quantity required
Main Car Station	
Auxiliary Car Station	

Car Station Type

Applied faceplate Sub-Plate only
 Full Swing Return Cab Panel*

Material / Finish

Stainless Steel #4 Brush Finish
 Muntz #8 Mirror Finish
 Other: _____ Other: _____

Floors & Stops

Total No. of Stops: _____
 Front Floors (quan): _____
 Rear Floors (quan): _____

Floor Markings

Braille Plates

Standard Other: _____ None

Digital P.I.

Segmented Display 2" 1"
 Provision only None

Emergency Lighting

Emergency light w/test Test only None

Fire Service

National Code; Year _____
 New York None Other: _____
(Includes keyswitch, call cancel button, jewel and buzzer)

Hands-Free Telephone / Intercom

EMS hands free phone-supplied by Monitor*
*(Includes call button and call acknow jewel)
 Provisions only for intercom, phone-supplied by customer
 Other : _____ None

Pushbuttons (LED light up) Tamper Resistant Plastic None

Door Open Door Open Front S button Door Hold
 Door Close Door Close Front Up/Down Taxi
 Alarm Door Open Rear Pass
 Call Door Close Rear Other _____

Key and Toggle Switches Key Switches (J200) Toggle Switches None

In locked service cabinet OR Mount on faceplate

Light Access Card Reader Override
 Fan Attendant Service Code Blue (includes jewel)
 Independent Service Photoeye Access/Off/Inspection
 Inspection Service Mass. EMT (includes disappearing sign and buzzer)
 Motor Generator (MG) Hospital Service (includes disappearing sign)
 Floor Lockout's; Total Qty: _____ Other _____

Emergency Stop

Push - Pull Switch Key Switch None

Indicator Jewels

Call Acknow Up / Down Motor Generator (MG)
 Emergency light Other: _____

Cover Size

_____ " H X _____ " W

Engraving

No Smoking Wording City Id Phase II Fire Service Instructions
 Capacity Certificate on file ... No Smoking Symbol
 Elevator Number Phone Instructions Other _____

Options

Floor Passing Signal Certificate Frame Cover Locks
 Nudging Buzzer Phone Jack Light Dimmer Switch
 110 VAC GFI Outlet Telephone Cabinet (Phone by Others)
 Provision only for card reader Voice Annunciator Other _____

Wiring

Standard Prewiring No Wiring Custom Prewiring; Indicate Below

Other Than Above, Indicate Below

*Per Monitor Standard Manufacture / Features

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Customer Name _____
 Job Address _____
 Contact Name _____



Monitor Controls

Car & Hall Lanterns*

For Car no's: _____

	Total quantity required
Car Lantern(s)	
Terminal Hall Lantern(s)	
Intermediate Hall Lantern(s)	

Lense Style
<input type="checkbox"/> Standard lenses
<input type="checkbox"/> Custom lenses
<input type="checkbox"/> Digital Illumination (In Lieu of LED)
<input type="checkbox"/> Tamper Resistant
<input type="checkbox"/> Front Removable Lenses

Lantern Type
Size: _____ " H X _____ " W
<input type="checkbox"/> Flush Mount
<input type="checkbox"/> Surface Mount
<input type="checkbox"/> Coverless

Concealed Fasteners	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Material / Finish	
<input type="checkbox"/> Stainless Steel	<input type="checkbox"/> #4 Brush Finish
<input type="checkbox"/> Muntz	<input type="checkbox"/> #8 Mirror Finish
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

Back Box	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Other Than Above, Indicate Below

*Lantern is Standard with LED Illumination and Electronic Chime

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Customer Name _____
 Job Address _____
 Contact Name _____



Hall Stations

For Car no's: _____

Hall Station Type (check one)
Size: _____ " H X _____ " W
<input type="checkbox"/> Flush Mount
<input type="checkbox"/> Surface Mount

Material / Finish
<input type="checkbox"/> Stainless Steel <input type="checkbox"/> #4 Brush Finish
<input type="checkbox"/> Muntz <input type="checkbox"/> #8 Mirror Finish
<input type="checkbox"/> Other: _____ <input type="checkbox"/> Other: _____

Pushbutton Style (LED light up)
<input type="checkbox"/> Tamper Resistant <input type="checkbox"/> Plastic

Fire Service
<input type="checkbox"/> National Code; Year: _____
<input type="checkbox"/> New York <input type="checkbox"/> None <input type="checkbox"/> Other: _____

Digital P.I.
<input type="checkbox"/> Segmented Display <input type="checkbox"/> 1/2" <input type="checkbox"/> Provision Only
<input type="checkbox"/> None <input type="checkbox"/> 1"

Engraving <input type="checkbox"/> On Faceplate <input type="checkbox"/> On Inlaid Plate

Operation	<input type="checkbox"/> Simplex	<input type="checkbox"/> Duplex	<input type="checkbox"/> Group			
Hall Station Style	Terminal	Terminal	Terminal	Inter.	Inter.	Inter.
Total Quantity Required						
At Floor(s)						
Fire Svc Key Switch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire Svc Jewel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phase I FS Instruction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Position Indicator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
"In Use" Jewel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access Key Switch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Door Open Button	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Door Close Button	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Braille	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appendix O/Fire Pictograph	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MCE Serial Link	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provision for Card Reader	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Emergency Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concealed Fasteners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor Lockout Key Switch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No Back Box	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Than Above, Indicate Below

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Customer Name _____
 Job Address _____
 Contact Name _____



Monitor Controls

Position Indicators

For Car no's: _____

	Total quantity required
Car Position Indicator(s)	
Hall Position Indicator(s)	

Position Indicator Type	
Size: _____ " H X _____ " W	Back Box <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Flush Mount	Concealed Fasteners <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Surface Mount	<input type="checkbox"/> 20 Degree Angle Display

Material / Finish	
<input type="checkbox"/> Stainless Steel	<input type="checkbox"/> #4 Brush Finish
<input type="checkbox"/> Muntz	<input type="checkbox"/> #8 Brush Finish
<input type="checkbox"/> Other:	<input type="checkbox"/> Other: _____

Digital or Multi-Light	
<input type="checkbox"/> Digital (segmented)	<input type="checkbox"/> Multi-Light
<input type="checkbox"/> 2" <input type="checkbox"/> Provision Only	<input type="checkbox"/> Round Indicators (Plastic)
<input type="checkbox"/> 1"	<input type="checkbox"/> Thru-engraved <input type="checkbox"/> 3/4" <input type="checkbox"/> 1"

USE THIS SECTION FOR POSITION INDICATOR / LANTERN* COMBO ONLY						
<table border="1"> <thead> <tr> <th>Lantern Arrows</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> </tbody> </table>	Lantern Arrows	<input type="checkbox"/> Yes <input type="checkbox"/> No				
Lantern Arrows						
<input type="checkbox"/> Yes <input type="checkbox"/> No						
<table border="1"> <thead> <tr> <th>Lense Style (if required; check one only)</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Standard lenses</td> </tr> <tr> <td><input type="checkbox"/> Custom lenses</td> </tr> <tr> <td><input type="checkbox"/> Digital Illumination (in Lieu of LED)</td> </tr> <tr> <td><input type="checkbox"/> Tamper Resistant</td> </tr> <tr> <td><input type="checkbox"/> Front Removable Lenses</td> </tr> </tbody> </table>	Lense Style (if required; check one only)	<input type="checkbox"/> Standard lenses	<input type="checkbox"/> Custom lenses	<input type="checkbox"/> Digital Illumination (in Lieu of LED)	<input type="checkbox"/> Tamper Resistant	<input type="checkbox"/> Front Removable Lenses
Lense Style (if required; check one only)						
<input type="checkbox"/> Standard lenses						
<input type="checkbox"/> Custom lenses						
<input type="checkbox"/> Digital Illumination (in Lieu of LED)						
<input type="checkbox"/> Tamper Resistant						
<input type="checkbox"/> Front Removable Lenses						

*Lantern is Standard with LED Illumination and Electronic Chime

Other Than Above, Indicate Below

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Customer Name _____
 Job Address _____
 Contact Name _____



Lobby Panel

For Car no's: _____

Total Number of Cars	_____
----------------------	-------

Size: _____ " H X _____ " W

Number of Groups	_____
------------------	-------

Segmented (Digital) PI			
<input type="checkbox"/> 1/2"	<input type="checkbox"/> 1"	<input type="checkbox"/> 2"	<input type="checkbox"/> Provision Only

Material / Finish	
<input type="checkbox"/> Stainless Steel	<input type="checkbox"/> #4 Brush Finish
<input type="checkbox"/> Muntz	<input type="checkbox"/> #8 Mirror Finish
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

Required Devices			
Specify Quantity	One Per Car	One Per Group	Item(s)
<i>(Complete one column per line only)</i>			
	<input type="checkbox"/>		Digital Position Indicator
	<input type="checkbox"/>	<input type="checkbox"/>	Phase I Fire Recall Key Switch; Specify Code: _____
	<input type="checkbox"/>	<input type="checkbox"/>	Fire Service Indicator Jewel
	N/A	N/A	# SHW EMS Intercom
	<input type="checkbox"/>	<input type="checkbox"/>	Emergency Power Selector (Interlocking Strip Switch Type)
	<input type="checkbox"/>	<input type="checkbox"/>	Emergency Power Key Switch
	<input type="checkbox"/>	<input type="checkbox"/>	Emergency Power Indicator Jewel
	<input type="checkbox"/>	<input type="checkbox"/>	Normal Power Indicator Jewel
	<input type="checkbox"/>	<input type="checkbox"/>	Out of Service Indicator Jewel
	<input type="checkbox"/>	<input type="checkbox"/>	Car-To-Lobby Key Switch
	<input type="checkbox"/>	<input type="checkbox"/>	Swing Car Key Switch (I/R)
	N/A	N/A	Individual Floor Lock Outs (specify quantity)
	N/A	N/A	Custom Prewiring; Indicate Below
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

Other Than Above, Indicate Below

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Customer Name _____
 Job Address _____
 Contact Name _____



Monitor Controls

Accessories

	Total quantity required
Top of Car Station	
Pit Stop Switch	
Hoistway Access Station	
Digital Encoder	
Spare Key (Two Standard)	
# MRI EMS Machine Room Intercom	
# HDSTL Machine Room Intercom Handset	
Intercom EMS Directory System:	N/A
# SHW Lobby Intercom	
# SHWMR Machine Room Intercom	
# EMS 4 - 8 Intercom Call Director	
6" Alarm Bell (6 Volt DC)	
Door Jamb Braille Plate	
PANA 40+ / 2D Janus Door Edge	
PANA 40+ / 3D Janus Door Edge	
Panachrome Janus Door Edge	
Flat / Blank Cover Plate: _____" H X _____" W	

Other Than Above, Indicate Below

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