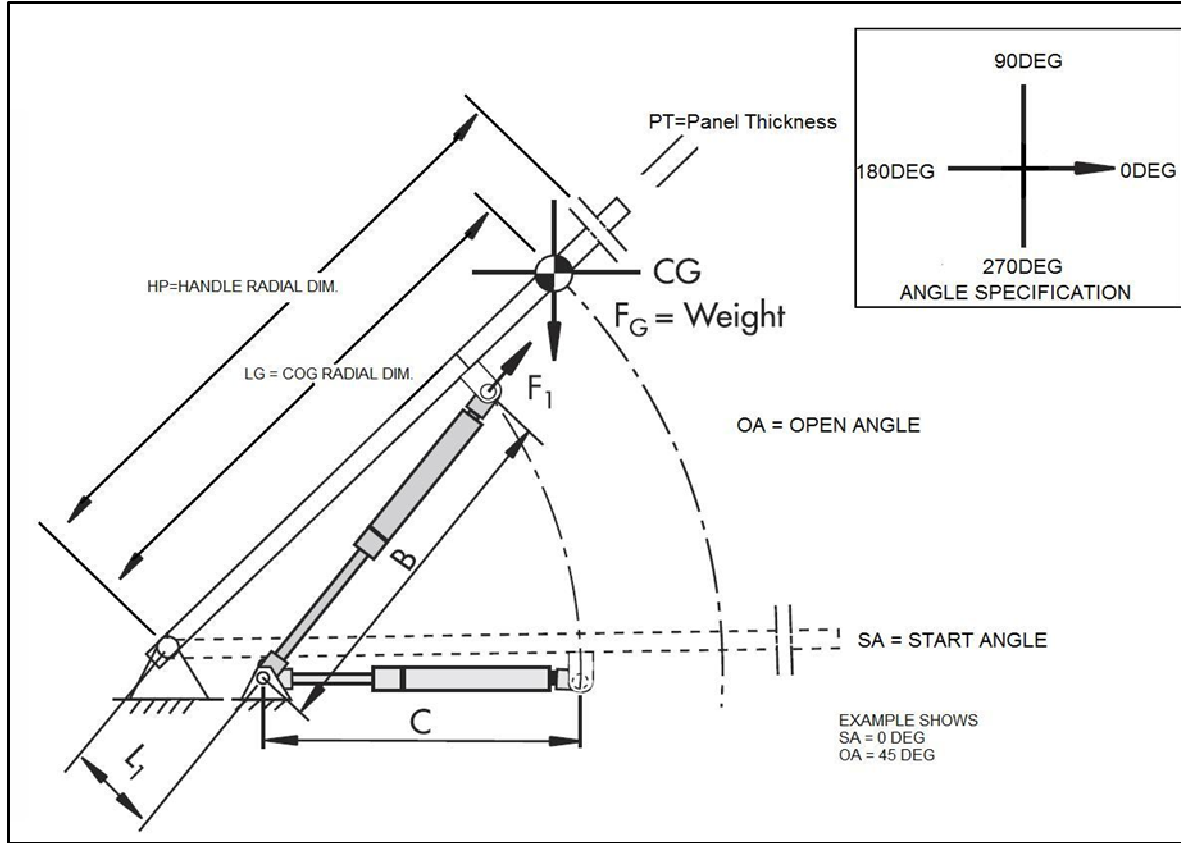


PRECISION GAS SPRINGS PTY LTD

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NAME _____ PHONE _____ EMAIL _____



REQUIRED FIELDS*

- LG: Radial distance to center of gravity _____ MM*
- W: Weight of the moving panel _____ KG*
- n: Number of gas springs _____ QTY*
- PT: Panel thickness _____ MM*
- SA: Start angle _____ DEG*
- OA: Open angle _____ DEG*
- HP: Radial distance to handle _____ MM*
- A: Stroke of the gas spring _____ MM
- B: Extended length of the gas spring _____ MM
- C: Compressed length of the gas spring _____ MM
- F1: Extension Force of the gas spring _____ MM
- L1: Perpendicular distance _____ MM

Handle loads desired: To open _____ KG To close _____ KG

Desired action: ___Autorise ___Stay down/Stay up ___Stay down/Hold up

Dampening: ___Opening ___Closing ___Open/Close Rate: ___Heavy ___Light

ADDITIONAL NOTES: Please send all drawings/photos in .jpg or .pdf format

How to Specify Worksheet