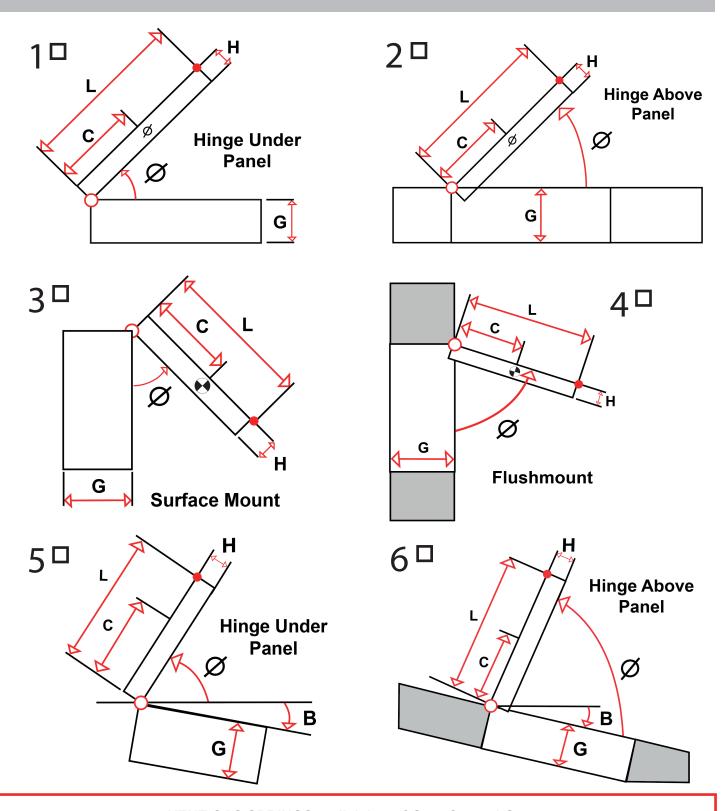


### Gas Spring Design Application Form:

Contact Name	E-mail
Address	City
County/Region	Postal Code
Country	Phone
Your Reference (Application name)	



Please tick the box of the diagram below which best displays your application:



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## Gas Spring Design Application Form: Continued (i)

Number of Springs per Panel  1 2	Weight of Panel (kg)
Starting Angle (B) (5&6 only)	Angle of Panel When Open (∅)
Distance from Pivot to End of Panel (L) (mm)	Distance from Pivot to Center of Gravity (C) (mm)
Thickness of Panel (H) (mm)	Maximum Depth of Mounting Position (G) (mm)
Operating Temperature Range	Special Operating Environment (eg: humid, corrosive, marine
From: To:	dusty etc.)
How often will this application be used?	
Times per day/week/month	



# Gas Spring Continued (ii) Gas Spring Continued (ii)

whi	ase select the statement ich best describes what you trying to achieve:	Do you require the spring to be mounted?:
	Option 1: Open with user assistance initially: When the lid is closed, it should stay closed and when it is open, it should stay open, similar to a car boot?	Outside, on the side of the lid.  Either.
	Option 2: Automatic Opening: The lid should always open automatically even when it is closed. The lid has a lock to keep it closed (lid will need a catch)?	
	Option 3: Partially reduce weight of application: The gas springs are only used to take some of the weight off. The lid should lower on its own at all times.	
L	Additional Comments:	