

Tel:(440) 808 -4258

PUMP MOUNT BELL HOUSING PTO CLUTCH
 www.loganclutch.com

Fax: (440) 808-0003

General Information:

Company Name: _____	Date: _____
Contact Name: _____	Title: _____
Address: _____	Division: _____
City, ST, Zip: _____	Phone: _____ Ext.: _____
E-Mail: _____	Fax: _____

Driving Unit:
Driven Unit:

Brand/Model _____

Main Engine

Fixed Displacement Pump

Gearbox

Auxiliary Engine

Variable Displacement Pump

Other _____

Starting Torque (max.): _____ ft.lbs.

HP rating: _____ @ _____ RPM.

Running Torque (max.): _____ ft.lbs.

If Pump: _____ GPM @ _____ PSI

HP rating: _____

Brand/Model: _____

Max. Torque: _____ ft.lbs. @ _____ RPM.

Conditions at Engagement:

Engaged Frequency: _____ Per Hour

Stationary

Full Load

Without Load

Time Engaged: _____ %

RPM While Engaged: _____ MAX

Time Disengaged: _____ %

RPM While Disengaged: _____ MAX

Period Of Acceleration: _____ seconds

RPM at Time of Engagement: _____

Ambient Temperature of Operating Environment: _____ ° F

Actuation pressure: _____ PSI

Hydraulic

None: Quote Power Pack Unit 24 VDC 12 VDC 120 VAC

Pneumatic

Conditions during Engagement:

Load Type:

Constant

Pulsating

Light Shock

Heavy Shock

Clutch Mounting Requirements:

SAE Housing Size: _____ SAE Flywheel Size: _____ Pilot Bearing O.D. : _____

Pump Mounting SAE Flange B C D Two Bolts Four Bolts Other _____

Pump Shaft Details B B-B C C-C D Other _____

Installed:

Horizontally without Pitch

Horizontally with Pitch: _____ ° MAX Output Up Input Up

Machine Description/Comments/Additional Details: _____
