

MATERIAL BASKETS

Custom Application Form



For pricing information: Fax completed form & contact info to 717-665-2861 or email Customer Service at customerservice@harringtonhoists.com

LOAD INFORMATION:

Describe the material you are planning to place in the basket: _____

Will the Material be placed in the Center of the Basket: Yes No
If No, Please Provide a Drawing or Sketch Indicating the Load Center.

Material Dimensions:		
	Min (in)	Max (in)
Height	_____	_____
Width	_____	_____
Length	_____	_____
Weight	_____	_____

Does the Material Require Protective Lining to Prevent Damage: Yes No

MATERIAL BASKET INFORMATION:

Required Wall Height: _____ Width: _____ Depth: _____ Capacity: _____

Door:

Specify Location: End Side
Specify Swing: Right Left

Other: _____

Wall Material:

Solid Expanded Metal Open Frame

Other: _____

Crane Attachment:

Chain Top Rigging Wire Rope Rigging Lifting Beam Lifting Bracket

Caster Wheels (specify floor surface): _____

Fork Lift Transport Pockets (specify dimensions):

Length: _____ Width: _____ Height: _____

Maximum Fork Outside Width: _____

Please provide pertinent application information not supplied above (*extreme product or operating temperature, extreme environmental conditions such as temperature or moisture, space or headroom restrictions, additional specifications*): _____