

BOGIE REQUEST FORM

| Company name: | | |
|--|-------------------------------------|---|
| Vehicle type: | | |
| Date: | | |
| Contact name: | | |
| Email: | | |
| | | |
| Axle, suspension, brake ca | culation and valves must be defined | and validated before any development of the frame |
| | BOGIE INFOR | <u>MATION</u> |
| Number of axles: | | |
| Load on the bogie: | | |
| Wheels: | | |
| Type of Suspension (Air/Mech) | | |
| ABS, EBS or without?: | | |
| Mudwings needed?: | | |
| Handbrake needed?: | | |
| Other options wanted: | | |
| (Crashbar, lighboard) | | |
| | | |
| | | |
| Equipment to be supply loose: | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Destination Country | | |
| Special requirements (Roll in Bogie, detachable, Lift etc) | | |
| Certification/Homologation requirements | | |
| Turning Circle Calculation Required | | |
| | | |
| Please at | tach a general drawing of the mad | hine (front_side and plan view) |
| T reuse ut | acir a general drawing of the mac | mine (from, side and plan view) |
| Any Additional Comments | | |
| Any Additional Comments | | |
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Tel: (+353) 45 897553

Please return all completed forms to eds@granningaxles.ie