

Questionnaire F 400 | Customised grippers

To:

FIPA GmbH

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Company

Name

Street

City, State, Zip Code

Phone/Fax

Customised grippers

Please complete the following questionnaire carefully, so that we can select the optimal product for you.

Robot-Gripper Interface

1. Robot type: _____		
2. Handling type	3. Media supply	4. Vacuum generation
<input type="checkbox"/> Linear	Number of vacuum circuits _____	<input type="checkbox"/> by FIPA
<input type="checkbox"/> Swivel axes _____ No. of axes	Number of compressed air circuits	<input type="checkbox"/> by the customer
<input type="checkbox"/> Delta robot (3-leg); FlexPicker	_____ bar	<input type="checkbox"/> Number of ejectors _____
Model name: _____	Tubing diameter _____ mm	Model name: _____
_____	Tubing length _____ mm	<input type="checkbox"/> Pump
<input type="checkbox"/> Other _____		Model name: _____
		<input type="checkbox"/> Side channel blower
		Model name: _____
		<input type="checkbox"/> Other: _____
5. Comments: _____		

Application

1. Type of product to be handled: _____		
Product weight: _____ g		
Product dimensions (LxWxH): _____ mm		
CAD available: <input type="checkbox"/> yes <input type="checkbox"/> no		
2. Item picked from:	3. Item placed on:	4. Cycle time
<input type="checkbox"/> Conveyor belt	<input type="checkbox"/> Conveyor belt	Pick-up _____ seconds
<input type="checkbox"/> Pallet	<input type="checkbox"/> Pallet	Placement _____ seconds
<input type="checkbox"/> Container	<input type="checkbox"/> Container	
<input type="checkbox"/> Tray	<input type="checkbox"/> Tray	
<input type="checkbox"/> Fixture	<input type="checkbox"/> Fixture	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	

5. Description of application:

Gripper Design

Integrated vacuum generation required: yes no

Media feed-through required: yes no

Interference contours (e.g. gripping space between products): _____

Labelling: _____

Colouring: _____

Special cleaning regulations: _____

Description of process: _____

Current solution: _____

Improvements required: