

**QUESTIONNAIRE
FOR
INTEGRATED TOOL CARRIER**

(Bids must be accompanied by this questionnaire fully completed by bidder)

1. Vendor _____
Make _____ Model _____
2. Operating and dimensional requirements (Section III.B. of Spec.)
 - A. Operating weight _____ lbs. (as defined in Section III.A.5)
 - B. Amount of counterweight included in "operating weight" _____ lbs.
 - C. Tipping load, full turn (SAE J732) _____ lbs.
 - D. Bucket breakout force _____ lbs.
 - E. Bucket reach at full height and bucket dumped at 45 degrees _____".
 - F. Bucket dump clearance at full height and dumped at 45 degrees (measured from cutting edge) _____".
 - G. Height to CL of hinge pin _____.
 - H. Degree of articulation (left & right) _____ degrees.
 - I. Total cycle time (raise, dump, lower) _____.
 - J. Tire size and type _____.
 - K. Forward/reverse speeds _____ / _____.
 - L. Travel speed-forward _____ MPH.
 - M. Tread _____". (Measured CL to CL of tires)
3. Engine:
 - A. Make _____ Model _____
 - B. Net brake horsepower (SAE J1349) _____ HP.
4. Transmission:
 - A. Make _____ Model _____
 - B. External transmission cooler provided _____ Yes/No.

Vendor _____

Make/Model _____

5. Differentials:

Front and rear axles are equipped with (check as appropriate):

___ limited slip differentials in both

___ no-spin in either

___ operator-controlled differential lock-up in front

6. Does steering system fully comply with all requirements herein?

_____ Yes/No

7. Does braking system fully comply with all requirements herein?

_____ Yes/No

Briefly describe service braking system:

8. Does hydraulic system fully comply with all requirements herein?

_____ Yes/No

9. Do ROPS cab (and its interior equipment) and bucket controls fully comply with all requirements herein? _____ Yes/No

10. Is all equipment required in section III.O, Equipment, furnished?

_____ Yes/No

11. Bucket:

A. Size _____ cu. yds.

B. Type _____

12. Person completing questionnaire: _____

Title/company: _____

Phone: _____

Fax: _____