

6

Model Selection Form

Rotary Damper/Vane Damper Model Selection Form

New products

1 Soft Absorber

2 Rotary Damper

3 Magnum Series

4 Speed Controller

5 Helical Isolator

6 Model Selection Form

1. Fill in an application of a rotary/vane damper (for what/how?)

2. Please draw a simple diagram of the mechanism/device in which you intend to install the soft absorber and the shape of the mounting parts.
 [Machine/Device] [Shape of Mounting Parts]

3. Fill in the operating conditions for a rotary damper/vane damper
 (The items that require no special designation are not required to be filled in.)
 Conditions for Use

For Rotational Motion

Body Dimensions	D	mm
	W	mm
	H (thickness)	mm
Position of gravity center of the body		
Angle for use	degrees	
Operating Duration	sec	

For linear motion

Body Moving Distance	mm
Body Moving Duration	sec
Driving Force	N

Body Mass					kg
Direction for Use	Horizontal Rotation	Vertical Rotation	Vertical Movement	Horizontal Movement	
Cycle of use cycle					cycle/min
Temperature for use					°C
Environment for use	Indoors		Outdoors		

4. Fill in the required quantity (planned quantity for mass production)

Your company's name	TEL
Division/Department	FAX
Representative's name	Adress

Contact information : FUJI LATEX CO., LTD. International Department. TEL +81-03-3259-2530 FAX +81-03-3293-6070

Soft Absorber Model Selection Form

For Linear Movement

1. Please tell us your intended purpose for using a soft absorber. (What you intend to use it on and how?).

2. Please draw a simple diagram of the mechanism/device in which you intend to install the soft absorber and the shape of the mounting parts.
 [Machine/Device] [Shape of Mounting Parts]

3. Please specify what kind of function and shape you would like to see in the soft absorber.
 (You may skip this part if you do not have any particular preference)

Shape

Total length			mm or less
Stroke			mm
External diameter	Screw type	M × (pitch)	
	Non-screw type	φ or less	
Cap			Required · Not required

Function

Max. drag		or less
Deceleration		or less
Recovering power		or less
Braking time		
Adjustment Method	Fixed · Adjustable	

4. Please enter your impact conditions and usage environment.

Impact conditions

Impact rate		m/s
Mass of the colliding object		Kg
External thrust		N
Operating cycle		times/minutes
Eccentric angle		degrees
Number of supports for soft absorber		本

Operating direction

Horizontal	Friction coefficient μ =	*1
Perpendicular	Facing upward · Facing downward	
Slope	From the horizontal surface	*2

*1 Please enter if using a conveyer, etc.

*2 Positive value for downward direction

Using a cylinder

Drive source	Pneumatic pressure · Hydraulic pressure	
Internal diameter of the cylinder	φ	
Pressure used		MPa
Number of units		units

Usage environment

Ambient temperature	°C	
Contact with liquid	No · Yes	
Contact with dust	No · Yes	
Measures against copper ions	None · Exterior only · Full	

5. Please enter the number of units (expected number of mass-produced units) you require. _____ units (Monthly · Single order)

Your company's name	TEL
Division/Department	FAX
Representative's name	Address

Contact information : FUJI LATEX CO., LTD. International Department. TEL +81-03-3259-2530 FAX +81-03-3293-6070

Soft Absorber Model Selection Form

For Rotational Movement

1. Please tell us your intended purpose for using a soft absorber. (What you intend to use it on and how?).

2. Please draw a simple diagram of the mechanism/device in which you intend to install the soft absorber and the shape of the mounting parts.
 [Machine/Device] [Shape of Mounting Parts]

3. Please specify what kind of function and shape you would like to see in the soft absorber.
 (You may skip this part if you do not have any particular preference)

Shape

Total length		mm or less	
Stroke		mm	
External diameter	Screw type	M ×	((pitch)
	Non-screw type	φ	or less
Cap		Required · Not required	

Function

Max. drag	or less
Deceleration	or less
Recovering power	or less
Braking time	
Adjustment Method	Fixed · Adjustable

4. Please enter your impact conditions and usage environment.

Impact conditions

Colliding Speed	m/s
Colliding Mass	Kg
External Driving Force	N
Angular Velocity (fill in either one of these)	rad/s degrees in seconds
Moment of Inertia	
Driving Source Torque	
Driving Source Type	
Cycle of Use	cycle/min
Inclination Angle	degrees
Number of supports for soft absorber	pcs

Operating direction

Direction of Rotation	Horizontal / Vertical / Inclined (°)
Position of Gravity Center	from rotating axle mm
Stopping Position	from horizontal surface ° *1
Mounting Position	from rotating axle mm

*1 Downward is positive.

Usage environment

Ambient Temperature	°C
Adhesion of liquid, etc.	Present / Absent
Adhesion of power dust, etc.	Present / Absent
Countermeasures against copper ion	Present / Perfect

* Please fill in only as far as you know in reference to the examples of selection calculation

5. Please fill in the required quantity (planned number for mass production) pcs (per month/only this time)

Your company's name	TEL
Division/Department	FAX
Representative's name	Adress

Contact information : FUJI LATEX CO., LTD. International Department. TEL +81-03-3259-2530 FAX +81-03-3293-6070

Helical Vibration Absorber Selection Form

1. Please specifically describe the applications for the helical vibration absorber

2. Please describe the schematic diagram of machine/equipment used
(H x W x D, position of gravity center, direction of gravity, planned position for installation, etc.)

3. Conditions for Use

Installation Method (Please circle on either one)	Compression Shearing and roll 45° compression / roll		
Mass of installed body	M		kg
Quantity of used vibration absorber (excluding stabilizer)	n		pcs
Quantity of use as a stabilizer	n		pcs
Temperature for use		℃ ~ ℃	
Other environmental conditions			
Absorption of Vibration		Absorption of Shock	
Machine vibration frequency f	Hz	Free falling height h	m
Machine rotational speed N	rpm	Allowable G value Ga	G
		* Maximum G value Gmax G	G
		* Applied duration of half sin acceleration input t	S
Please fill in the required quantity (planned quantity for mass production)		pcs (per month/only this time)	

Note The symbol "*" stands for a case where the half sin acceleration is input

4. Requested Items

Absorption of Vibration		Absorption of Shock	
Allowable Deflection	mm	Allowable Deflection	mm

Your company's name	TEL
Division/Department	FAX
Representative's name	Adress

Contact information : FUJI LATEX CO., LTD. International Department. TEL +81-03-3259-2530 FAX +81-03-3293-6070