



Clutch Application Information

Submit Via Email: engineering@machiii.com, Fax: 859-655-8362
or [Click Here](#) to Submit Online

Please provide as much information as known and, if possible, submit a sketch of the drive system.
For Engineering Assistance: US Toll Free 866-291-0849, Outside USA +1 859-291-0849

Name: _____ Date: _____
 Title: _____ Phone: _____
 Company: _____ Email: _____

1. Unit is needed For: New Machinery Retrofit - to replace (Mfg., Model): _____
 If Retrofit, why is current model being replaced? _____

2. Environmental Conditions - Check ALL that apply:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Indoor | <input type="checkbox"/> Indirect Wash-down | <input type="checkbox"/> Clean Room | <input type="checkbox"/> Marine |
| <input type="checkbox"/> Outdoor – Totally Exposed | <input type="checkbox"/> Oil Contamination | <input type="checkbox"/> Medical Mfg. | <input type="checkbox"/> Sub Sea |
| <input type="checkbox"/> Outdoor – Enclosed | <input type="checkbox"/> Particulate Contamination | <input type="checkbox"/> Pharmaceutical Mfg. | <input type="checkbox"/> Food Handling/Grade |
| <input type="checkbox"/> Direct Wash-down | <input type="checkbox"/> Condensation | <input type="checkbox"/> Explosive Substances | |
| <input type="checkbox"/> Other: _____ | | | |

3. Temperature Range of the destination environment: Minimum _____ (°F / °C) Maximum _____ (°F / °C)

4. Clutch Mounting:

- End of Shaft Shaft Size _____ (in / mm) Keyway: Standard or Other: _____ (in / mm)
- Through Shaft . . . Shaft Size _____ (in / mm) Keyway: Standard or Other: _____ (in / mm)
- Coupling Two Shafts Select One: Rigid (zero angular or parallel misalignment)
 Flexible Coupling (Maximum 3° angular, 0.040" parallel offset)
 Drive Shaft Size _____ (in / mm) Keyway: Standard or Other: _____ (in / mm)
 Driven Shaft Size _____ (in / mm) Keyway: Standard or Other: _____ (in / mm)
- NEMA or IEC Frame Size/Type _____

5. Orientation of the shaft on which the clutch will be mounted: Horizontal Vertical

6. Pulley or Sprocket Requirements: None Pulley: Type _____
 Sprocket Circle One: Single / Double; Chain Size _____ # of Teeth _____
 V Belt Sheave: # of Grooves _____ Belt Type _____

7. Is a low backlash drive required? _____ If yes, state the maximum tolerance _____ Degrees

8. Motor Specs: HP _____ RPM _____ If not electric, please specify type here: _____

9. RPM at Clutch: _____ RPM

10. Inertia Started: _____ (lb.ft² / kg.m²)

11. Required Torque _____ (lb.in / lb.ft / Nm)

12. Cycle Rate _____ x Per Minute

13. Operating Air Pressure Restrictions (if any): Minimum _____ PSI Maximum _____ PSI

14. Space Restrictions: Maximum Length _____ (in / mm) Maximum OD _____ (in / mm)