DAKOTA FLUID POWER

EQUIPMENT INDEX FORM

PHOTOS OF EQUIPMENT/NAMEPLATES REQUIRED

Date: 10/4/21 **Date Needed:** 11/1/21 **Phone:** 701-678-2154

Customer Name: JOB ERECTION AND ENGINEERING

Contact Name: DUSTU MUND

Address: 506 EAGLE LANE, GWINNER ND 58040

Email: DUSTY.MUND@JOBERECTION.COM

- ☑ Compressor/Dryer
- ☐ Vacuum Pump
- ☐ Hydraulic Power Unit
- ☐ Parts Only Quote
- ☐ Other

- ☐ Formal Proposal
- ☐ P21 Quote

PART TYPE:

- ☑ OEM Only
- ☐ Aftermarket Only
- ☐ Both OEM & Aftermarket
- ☐ DFP Brand Oil

USE:

- ☑ Primary
- ☐ Back-up
- ☐ Trim

Need Back-up:

- ☐ YES
- ☑ NO

Action	Initials	Date	Due Date	Notes
Data Collected	GM	10/4/21		
Submitted to Service				
Proposal Generated				
Returned to Sales				
Presented				
Accepted	Area Sales Manager: _____ Date: _____ Service Manager: _____ Date: _____			

Notes: *(Ex. Pressure Gauges, DPI, Floats, Drains, Oil/Water Separators, Etc.)*

THIS UNIT IS A NITROGEN GENERATOR AND SHOP COMPRESSOR ALSO 2 LASER TOURCHES, 185 PSI REQUIREMENT.

THE FLOOR MANAGER IS JEFF ELIJAH, MOBILE 701-680-9936

I WILL FILISH THE INDEXING AFTER A VISIT. I DO NEED A 3001-1602-10 AIR FILTER TO GO VISIT THEM.

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Is this unit under warranty? ☑ YES ☐ NO **Expiration:** 5/2027

Asset Run Hours: 3K ??? **Oil Used/Capacity:** ROTO X-TEND, 5GAL ??

Does the customer have a copy of the service/parts manual? ☐ YES ☑ NO

Service Manual Advised Intervals:

Air Filter: 2K **Oil Filter/Sample:** 4K

Separator: 4K **Oil:** 8K **F.G.:** ☐ YES ☐ NO

CONDITIONS:

Cooling Ducting: ☐ YES ☑ NO

Equipment Accessiblity: MEZZANINE **Ambient Temp.:** 75F

Room Pressure: ☐ Positive ☐ Negative ☑ Neutral

Cleanliness: POOR

PLEASE GET PHOTOS OF TAGS.

COMPRESSOR ☐ Piston ☐ Flooded Screw ☐ Vane

Make: ATLAS COPCO **Model:** GA45VSD FF

Serial #: API869496

HP: 60 **PSI:** 185 **Location:** MEZZANINE

Separator: ☐ Clear Top ☐ Traditional ☑ Spin-on

Service Quote Request:

☐ 1K ☑ 2K ☐ 3K ☐ 4K ☐ 5K ☐ 6K ☐ 7K ☐ 8K

☐ Quarterly ☑ Semi-Annual ☐ Annual

Week(s):

DRYER ☐ Heatless ☐ Heated/Blower ☐ Refrig.

Make: FULL FEATURE **Model:**

Serial #:

CFM: 332 **Location:** MACHINE MOUNT

Service Quote Request:

Full SVC: **Inspections:** YES

Filter Bypass? ☐ Y ☐ N **Dryer Bypass?** ☐ Y ☐ N

Filter	Model #	Element
Pre Filter		
Pre Filter		
After Filter		

HYDRAULIC POWER UNIT

Motor HP (Photo) Nameplate: **Pump Make/Model:**

Return Filter Make/Model: **Pressure Filter Make/Model:**

Reservoir Size/Type: **Clean Out Cover Size/Type:**

Hydraulic Fluid Brand/Type: **F.G.** ☐ Y ☐ N **Immersion Heater Make/Model:**

Valving Type/Make/Model: **Actuator(s) Type/Make/Model:**

System Operating Pressure: **Typical Operating Temp:**

Description of System *(What is it Used For?)*: **Drive Coupling:**

ESTIMATED ANNUAL RUN HOURS
6K

FACTORS:	24 HRS x 7 DAYS x 52 WEEKS = 8736	24 HRS x 5 DAYS x 52 WEEKS = 6240
	16 HRS x 5 DAYS x 52 WEEKS = 4160	8 HRS x 5 DAYS x 52 WEEKS = 2080