

Checklist Volume Measurement

Requesting important data to produce an individual quotation

Project	
Company	
Street	
Postal code, Place	
Contact person	
Telephone	E-mail
Contact at Soehnle	Date

1. Data of the object to be measured

Measuring object	Smallest object	Largest object	
Type of objects (Carton, pallet etc.)			
Length (in driving direction)	mm	mm	
Breadth	mm	mm	
Height	mm	mm	
Desired accuracy	mm	mm	
Colour of objects			
Different products?	☐ yes ☐ no		
Quantity of options	options		

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2. General requirements

Does the measurement has to be approvable?	∟ yes ∟ no			
The measuring operations is	☐ fully automatic☐ accompanied by personal supervision			
Aim of measuring application	 ☐ Cuboid volume acquisition ☐ Volume weight acquisition (incl. weight acquisition) ☐ Real volume acquisition ☐ Ground weight acquisition (incl. weight acquisition) ☐ Grey picture / top view (3D-scanning) ☐ Picture ☐ Other 			
3. Object handling				
Manually via personnel	☐ Hand pallet truck☐ Electronic pallet truck☐ Fork lift☐ Other			
Automatically via an application	☐ Band conveyor (Packages)☐ Pallet conveyor technique☐ Underfloor chain conveyor system☐ Other			
4. Object identification				
Is identification necessary?	☐ yes ☐ no			
Type of identification	Barcode			
	Туре			
	RFID			
	☐ Other			



5. Control

Shall the system be inte	∐ yes ∐ no			
ls a control available?	☐ yes ☐ no			
If yes, brand and	d type of control:		· · · · · · · · · · · · · · · · · · ·	
Task of control:				
Does a function description exist? If yes, please attach				☐ yes ☐ no
6. Data comm	<u>unication</u>			
Interface type	☐ digital interface	Туре	RS232 RS422 other	
	☐ Network	Туре	Ethernet Wireless LAN other	
	tion be processed and transferred			☐ yes ☐ no
7. Other requi	<u>rements</u>			
Installation site of the vo	☐ Fix		☐ Mobile	
Power supply	230 V AC available	<u> </u>	V AC available	
	other (please state):			
Accessories	☐ Scanner☐ Printer☐ RFID – write and read ap			
Other	☐ yes ☐ no			
If yes, what:				



8. Environmental conditions

Temperature	min:		max:	
Humidity	☐ yes		☐ no	
Required protection class IP:				
Chemicals	☐ yes (please	state):		no
Foods	☐ yes (please	state):		no
Pharmaceuticals	yes (please	state):		no
Ex-zone	☐ yes	no		
Other information				

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