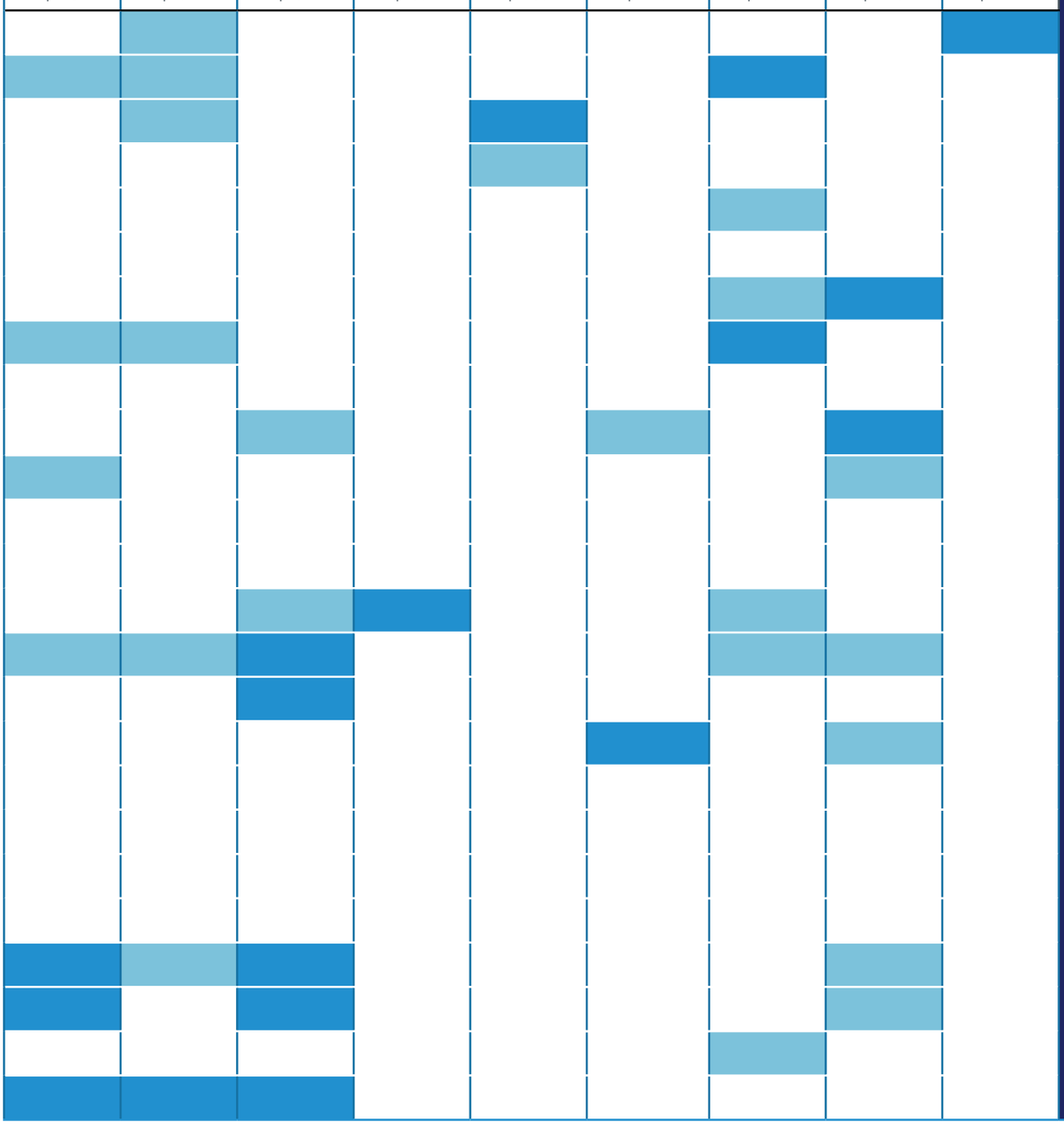
MOUNTING

APPLICATIONS	HIGH RADIAL FLEXIBILITY		HIGH AXIAL FLEXIBILITY	LOW FREQUENCY	HIGH SHEAR FLEXIBILITY	PRIMARILY AXIAL LOADING	
	RADIAFLEX®	STOPS	PAULSTRADYN®	EVIDGOM®	SANDWICH	STABIFLEX	PAULSTRAFLOAT®
Pages	p. 54	p. 58	p. 63	p. 67	p. 70	p. 73	p. 76
ACOUSTIC CASING							
AIR CONDITIONERS / FANS							
CEILINGS / PIPELINES / PIPING							
CIVIL ENGINEERING							
CONTROL AND MEASURE EQUIPMENT							
CRANES							
ELECTRICAL CABINETS							
ELEVATORS							
FLOATING FLOORS							
FRAGILE EQUIPMENT TRANSPORTATION							
GENSET							
HOPPERS							
LABORATORY EQUIPMENT, COMPUTER							
MACHINES TOOLS							
MOTO-COMPRESSORS							
MOTO-PUMPS							
ONBOARD ELECTRONIC EQUIPMENT							
POWER PRESS							
ROLL							
SHREDDERS							
SIVES							
SPEED BOX / REDUCERS							
THERMAL MOTORS							
TRANSFORMERS							
VEHICLE CABIN							

APPLICATION GUIDE

	PRIMARILY AXIAL LOADING				SAME AXIAL & RADIAL FREQUENCY			ACOUSTIC
S.C.	S.T.C.	22000	NIVOFIX®	TRAXIFLEX®	SPÉCIAL ELECTRONIQUE	BECA	VIBMAR	STRASONIC
p. 78	p. 82	p. 84	p. 99	p. 106	p. 120	p. 102	p. 148	p. 172



Antivibratory suspension survey on the next page

Recommended application

Admissible application

HUTCHINSON
PAULSTRA

We make it possible

Survey
Antivibratory suspension

Date :.....

Company :..... Address : .....

Tel : ..... Mail : .....

Contact : ..... Function : .....

Technical informations

1. Application :

Type of machine : .....

Stationary application ☐ Embedded application ☐

The supports will work in
- compression (straight) ☐
- shear (lateral) ☐
- traction (suspended from the ceiling) ☐

2. Weight of the machine :

Total weight : ..... Kg Number of mounting points : .....

Is the gravity center centered? Yes ☐ No ☐

If no, position of the gravity center : .....

3. Vibration and / or shock of the equipment :

Machine rotation speed :

Minimum : ..... tr/min Normal : ..... tr/min Maximum : ..... tr/min

For shock machines, indicate the rate : ..... knock/min

4. Environment :

Outdoor mounting ☐ or indoor mounting ☐

Ambient temperature : .....°C

Presence of liquid : Yes ☐ No ☐

If Yes precise : .....

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