



## RETROFIT CONVERSION DATA

Date: ..... Customer: .....

Telephone number: ..... Fax number: .....

### VEHICLE DETAILS

Manufacturer: ..... Model: .....

Chassis number: .....

Function: **Tractor** **Rigid** **Rigid-Drawbar** Body type: .....

Wheelbase: ..... m Chassis Frame Width: ..... m

Drive Axle Suspension: **Air** **Mechanical** Year of Manufacturer: .....

Does the Vehicle have Electronic Brakes fitted? **Yes** **No**

Please attach complete details from Brake Load Sensing Valve Setting Plate if applicable

### CONVERSION REQUIREMENTS

Position: **Mid** **Tag** Bogie Spread: ..... m

Revised Gross Vehicle Mass: ..... kg

Capacity of Additional Axle: ..... kg

Control: **Lift** **Non Lift** Air Kit Required: **Yes** **No**

Height from the underside of the chassis to ground at position of additional Axle:

Laden: ..... m Unladen: ..... m

Additional axle tyre size to be fitted: ..... **Single** **Twin**

If twin tyres to be fitted state required track: ..... m

If Mid Axle is to be fitted is the propeller shaft offset? **Yes** **No**

Requested Axle Type: **Drum** **Disc**

**Special Notes:**

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