

Custom Resistor Design Inquiry Form

PLEASE COPY AND SEND TO: MILWAUKEE RESISTOR CORPORATION
8920 W. HEATHER AVENUE, MILWAUKEE, WI 53224
OR FAX TO: ((414) 362-9876
email: sales@milwaukeeresistor.com

For special application resistors please provide the data requested below and forward this data sheet to MRC for a prompt recommendation and quotation.

Name _____ Title _____
Company _____
Street Address _____
City _____ State _____ Zip _____
Phone _____ FAX _____
Email Address _____

APPLICATION

Describe: _____

Resistor design type; if known (Grid, Ribwound, etc.) _____

ELECTRICAL DATA

Voltage _____ AC AC-3phase DC Pulse(specify) _____
Current: Operating _____ Surges _____ Surge Duration _____
Resistance _____ (TapsL: see below) Power to be dissipated _____
Duty Cycle _____ Time between cycles _____
Motor control applications: Starting Braking Other _____
Motor nameplate data: _____ Type of motor: _____

COOLING DATA

Ambient temperature _____ Limited temperature rise? If so, specify temperature _____
 Convection cooled Forced Air - If air is already available, how much?
 Indoor Operation Outdoor Operation Outdoor Exposed

MECHANICAL DATA

Size/Weight limitations _____ If resistor will be enclosed, describe the enclosure and level of protection required _____
Type of mounting desired _____ Type of terminal _____

OTHER DATA

Taps/Independent Sections _____
Special Resistance Tolerance _____ Special Coating _____
Special Temperature Coefficient _____
Additional Requirements _____

LOAD BANK DATA

What sections operate independantly? _____
All sections in one bank or grid? _____
How are sections connected? _____ By MRC By Customer



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