

Anfrageformular
Kompensationsdrosseln und
Symmetrierdrosseln
 Request form shunt chokes

Netzspannung Rated voltage	U _N : _____ V	<input type="checkbox"/> L-L	<input type="checkbox"/> L-N	<input type="checkbox"/> 3~	<input type="checkbox"/> 1~
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Netzfrequenz Rated frequency	<input type="checkbox"/> 50 Hz	<input type="checkbox"/> 60 Hz
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Maximale Betriebsspannung Maximum operating voltage	U _{MAX} = _____ V
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Induktive Bemessungsleistung Rated reactive power	Q _N (U _N) = _____ kVAr
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Umgebungstemperatur Ambient temperature	<input type="checkbox"/> 40°C	<input type="checkbox"/> _____ °C
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Aufstellhöhe üNN Altitude M.S.L.	<input type="checkbox"/> ≤ 1000 m	<input type="checkbox"/> _____ m
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Schutzart System of protection	<input type="checkbox"/> IP00	<input type="checkbox"/> IP_____
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Zwangsbelüftung Forced ventilation	<input type="checkbox"/> keine none	<input type="checkbox"/> _____ m/s
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Temperaturklasse Temperature class	<input type="checkbox"/> keine Vorgabe no data	<input type="checkbox"/> B	<input type="checkbox"/> F	<input type="checkbox"/> H	<input type="checkbox"/> _____
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Bemessungs Steh-Blitzstoßspannung und Stehwechselfspannung Rated lightning impulse withstand voltage and separate source AC withstand voltage	<input type="checkbox"/> keine Vorgabe no data	<input type="checkbox"/> LI / AC: _____ / _____ kV
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Sonstige Anforderungen Further requirements

Adresse Address	Name
	E-mail
	Telefon Telephone