



ABC Transmission SCAAN Worksheet

(*) Fields are required

*Your Name: Date Requested:

*Your Company Name: Date Required:

*Your Phone: Submit To:

*Your Fax:

*Your Email:

What part of the vehicle's performance do you want to determine (i.e. startability?, top-speed?, RPM at 60 mph?, etc.)?

SCAAN#	INPUT DATA/ RUN #1	RUN #2	RUN #3	RUN #4	RUN #5
Customer	<input type="text"/>				
Vehicle Make/Model	<input type="text"/>				
Vocation/type	<input type="text"/>				
Engine make & model & year	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Horsepower Torque & Gov RPM	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Transmission model & # of speeds	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Vehicle Weight GVW/GCW	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Amount of weight on rear drive wheels	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tire size/brand Rev's per mile (Radial?) 1. Standard profile 2. Low Profile 3. Wide base single	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Vehicle height	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Vehicle width	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Axle Ratio (or top speed)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of tires on the road	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Drive axle: Single/tandem Single/with tag Two Speed Auxiliary box	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Road surface	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Clutch fan? Y/N	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>
Air deflector? Y/N	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>	<input type="text" value="Y"/>