ENQUIRY FORM FOR

Drawings

AUTOMATED PARKING SYSTEM

Please click on the fillable fields and return per e-mail to: info@lodige.com



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Address: . EMail: . Project name: .					Planner Architect Client Consultant Other:	Tel.: +49 5642 702-0 E-Mail: info@lodige.com	
Site Information	า						
New building		Existing Bu	ilding				
Public building		Residential	Office	s Ho	otel Other	r:	
Peak occupancy (fro	om-to:)			Share of capa	city in %:		
Start of planning ph Building phase: Completion date: System budget:							
Type of User:		- · ·		-: II I			
General public		Closed circle Disabled parking required Caretaker/staff parks car					
User parks car		Caretaker	/Stall Parks Car				
Parking System Available area			h x width	m	Number c	of entrances	
Entrance via level (ground floo	r, basemen	t, other)				
Required number o	f parking p	ositions:				hicles	
				es (number of s	paces required	d)	
System Position	ing:	Free stan Above gr	=	Integrated in Underground	ito a building	Both	
Building height: Building depth:		•	m m		No restriction No restriction		
Are there restricting	g building c		walls? se indicate on d	rawing)			
Are there other con: No	straints rec		ideration? ease mention:				
Which aspect is Number of park Performance (The Price	ing spaces		r your proje	ct?			

Please attach in dwg format or pdf. Please indicate vehicle access point.