



(15) Customer: _____ (16) Date: _____

(17) Gate Site: _____ (18) AG#: _____

NOTES:

- 1) Fill in ALL dimensions and customer information above (1 thru 18) referencing explanations on the back.
- 2) Indicate any contour/s or curb notch/s (if applicable) and include additional drawing or sketch if needed.
- 3) Please call our Service Department with any questions you may have at: (800) 944-4283

NOTICE THE INFORMATION CONTAINED ON THIS DOCUMENT IS CONFIDENTIAL. ANY DISSEMINATION, UNAPPROVED DISCLOSURE OR COPYING OF THIS INFORMATION IS STRICTLY PROHIBITED	Date: 08/10/06	 AutoGate Gate Entry Systems Berlin Heights, Ohio FAX (419) 588-3514
	Drn. By: MKS	
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES ANGLES ± 1° XX ± 1/32, XX ± .01, XXX ± .005	Sheet: 1 of 2	Dwg.: 116 Title: Gate Replacement Dimensions (no arm)

Explanations of each of the Replacement Gate Dimensions Required	Dimensions
1) CENTER of top mounting bolt hole to the BACK END of the gate.	1)
2) BACK END of the gate to the CENTER of the lifting lug bolt.	2)
3) OAL (Over All Length) of gate, from OUTSIDE to OUTSIDE of tubing.	3)
4) Tubing size (normally 2" square).	4)
5) Over all HEIGHT of gate frame, nearest to operator arm	5)
6) CENTER of top mounting bolt hole to the BOTTOM of the gate frame.	6)
7) CENTER of lifting lug hole to BOTTOM of gate frame.	7)
8) Over all height of the gate frame, end of the gate.	8)
9) BACK END of the gate to the CENTER of the FIRST mounting hole on the BOTTOM plate.	9)
10) Private side rear mounting bolt CENTER to the EDGE of the gate tubing.	10)
11) Private side mounting bolt CENTER to the EDGE of the windbrace angle(N/A on some gates)	11)
12) Bottom gate mounting plate: _____ 2-Bolt (older) or _____ 4-Bolt (newer).	12)
13) Face of the windbrace angle to the INSIDE of face of the windbrace mounting lug.	13)
14) BACK edge of the gate to the INSIDE face of the windbrace mounting lug.	14)
15) Customer:	16) Date:
17) Gate Site:	18) AG#:

NOTES:

- 1) Fill in ALL dimensions and customer information above (1 thru 18), using the drawing on the reverse side.
- 2) Indicate any contour/s or curb notch/s (if applicable) and include additional drawing or sketch if needed.
- 3) Please call our Service Department with any questions you may have at: (800) 944-4283

Date:	02/23/07	
Drn. By:	MKS	
Sheet:	2 of 2	Berlin Heights, Ohio FAX (419) 588-3514
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