









# Blizzard Configurator

Please complete one sheet for each Blizzard type required and email to us at [info@tempest.biz](mailto:info@tempest.biz)

Name		
Company		
Email		
Phone		
Project Name & Location		
Projector & Lens Model #	Projector:	Lens:
Blizzard Model	52. _____	
Quantity		
Destination Country		
Install Date		
Enclosure Type	Landscape <input type="checkbox"/> Portrait <input type="checkbox"/> Ultra Short Throw <input type="checkbox"/>	
Projector Mount	Slide <input type="checkbox"/> Fixed <input type="checkbox"/>	
Projector Orientation	Landscape/UST: Feet Down <input type="checkbox"/> Feet Up <input type="checkbox"/> Portrait: Feet Left <input type="checkbox"/> Feet Right <input type="checkbox"/>	
<b>Options &amp; Accessories</b>		
Thermal Insulation	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Inlet Cowl	Yes, Qty _____ No <input type="checkbox"/>	
Desert Filter Baffle	Yes, Qty _____ No <input type="checkbox"/>	
Positive Pressure	Yes, Qty _____ No <input type="checkbox"/>	
Sun Shade	Yes, Qty _____ No <input type="checkbox"/>	
Feet-Up Kit	Yes, Qty _____ No <input type="checkbox"/>	
Angle Mount Kit	Yes, Qty _____ No <input type="checkbox"/>	
Cyclovator	Yes, Qty _____ No <input type="checkbox"/>	
Unistrut Kit	Yes, Qty _____ No <input type="checkbox"/>	
Stacking Kit	Yes, Qty _____ No <input type="checkbox"/>	
Drop Arms Kit	Yes, Qty _____ No <input type="checkbox"/>	
Swivel Stacking Kit	Yes, Qty _____ No <input type="checkbox"/>	
XYZ Kit, Horizontal	Yes, Qty _____ No <input type="checkbox"/>	
XYZ Kit, Vertical	Yes, Qty _____ No <input type="checkbox"/>	
Ethernet Comms	Yes, Qty _____ No <input type="checkbox"/>	

Spare Inlet Filter	Yes, Qty _____ No <input type="checkbox"/>
Color	Standard, Light Bronze <input type="checkbox"/>
	Custom, RAL # _____
	Gloss Level _____%


**UST Lens Configuration:**

		
90deg Up <input type="checkbox"/>	90deg Down <input type="checkbox"/>	Periscopic A <input type="checkbox"/>
		
90deg Right <input type="checkbox"/>	90deg Left <input type="checkbox"/>	Periscopic B <input type="checkbox"/>
		
	Straight, Vshift Down <input type="checkbox"/>	Straight, Vshift Up <input type="checkbox"/>

**Custom Requests:**

<b>Factory Use Only:</b>	
SO Number	
Date	
Electrical	IEC <input type="checkbox"/> NEMA <input type="checkbox"/>



 Made in the USA

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In the interest of continuous product improvement, specifications are subject to change without notice

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