



# Pre-conversion Evaluation Form

FILE NO.:
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**Customer Name:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Tel:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **email:** \_\_\_\_\_

**Desired Fuel (CNG, LPG, Hydrogen):** \_\_\_\_\_

<b>ENGINE DATA</b>	
Manufacturer / Model Number / Model Year	
Application (e.g. Truck, Bus, Gen-set)	
Engine Capacity (total in litres), Bore x Stroke	
Number of Cylinders	
Cylinder Configuration (e.g. in-line / vee)	
Firing Angle between Cylinders if applicable (45, 60, 90° etc)	
Compression Ratio	
Firing Order	
RPM Operating Range (cranking/ idle / max / rated)	
Induction - (naturally aspirated, turbo, intercooled)	
Boost Pressure (BAR)	
Induction Type (2 stroke / 4 stroke)	
Engine Fuel Type (diesel, gasoline)	
Electric Start (yes / no)	
Miles / Kilometers on Engine (Vehicle)	(                      )
Condition of Engine	
Additional Information	
<b>IGNITION SYSTEM DATA:</b>	
Supply Voltage (igniter / coils) (12 V, 24 V)	
Ignition type (single coil, dual coil, distributor, coil-on,plug)	
Timing disc - (camshaft or crankshaft mounted)	
Spark Plug Manufacturer & Type	
Spark Plug Gap	
Spark Plug Wires Type and Manufacturer	
Total Resistance (including connectors)	



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Ignition timing Range Required (degrees)	
Global Retard Required (yes / no)	
RPM Limiter Required (yes / no)	
Other Analogue / Digital Inputs / Outputs Required?	
Number of Maps Required	
Additional Information	
<b>FUEL SYSTEM DATA:</b>	
Electronically Controlled Fuel Injection (yes / no)	
Demand Type Reducer / Mixer (yes / no)	
Gas Supply Pressure (BAR)	
Driving Range Required (miles, Km)	
How many CNG Cylinders?                      What Size?	Cylinders:                      Size:
Current Fuel Use: Gasoline __ Diesel __ Fuel Oil __	Gallon/Liter _____ Trip / Day _____
Additional Information:	
<b>GENERAL DATA:</b>	
Emissions Testing Required (yes / no, static, dyno, vehicle)	
Test Duration (program start / finish dates)	
Test Environment (temperature / humidity)	
Emissions Standard Target	
Performance Target (Hp or Kw)	
Additional Information:	