Operating Instructions
Congratulations on your purchase of the Arjo Sara 2000.

Symbols used adjacent to the text in these instructions:-

**Danger** Means:- electrical hazard warning, failure to understand and obey this warning may result in electrical shock.

**Warning** Means:- failure to understand and obey this warning may result in injury to you or to others.

**Caution** Means:- failure to follow these instructions may cause damage to all or parts of the system or equipment.

**Note** Means:- this is important information for the correct use of this system or equipment.

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The vertical and horizontal lines printed in the margins adjacent to the text/illustrations in these instructions are for Arjo use only and should be disregarded by the reader.

### Parts referred to in these Instructions

1. Adjustable chassis legs
2. Patient foot rest
3. Braked castors
4. Battery compartment
5. Battery pack
6. Knee pad
7. Control handset
8. Manoeuvring handle
9. Leg strap connection knob
10. Leg support straps (with variable adjustment)
11. Sling attachment clips
12. Patient support arms (with grab handles)
13. Sling
15. Chassis
16. Buttock/leg support (transfer sling only)
17. Reset button (Green)
18. Emergency stop button (Red)
19. Battery state indicator light
20. Emergency lowering switch (covered with usage indicator seal)
21. Raise button
22. Lower button
23. Chassis leg opening button
24. Chassis leg closing button
25. Control handset
26. Hanging hook (on back)
27. System overload fuse (re-settable)

**Fig. 1**

**Emergency lower switch label**

mP1311, P1066/2, P1223, P1067/2, label
Note: On delivery of your hoist, check that the usage indicator seal fixed across the emergency lowering switch (see Fig. 1) is intact. If it is broken, contact Arjo Ltd or their appointed distributor, before using the hoist.

Before using your Sara 2000, familiarise yourself with the various parts as illustrated in figure 1, and thoroughly read and understand these Operating Instructions.

The Sara 2000 is manufactured to a very high standard, and primarily designed to assist patients when standing and toileting, and for use as a short distance patient transfer aid.

The Sara 2000 is designed for quick easy transfers from one sitting position to another, and to elevate a patient for toileting, repositioning, changing of incontinence pads, wound dressings, standing practice etc. It is not intended for long periods of suspension or transportation.

This product has been designed and manufactured to provide you with many years of trouble free use, however, this product does contain components that with regular use are subject to wear.

SOME OF THESE PARTS ARE SAFETY CRITICAL TO THE OPERATION OF THE HOIST AND WILL NEED EXAMINING AND SERVICING ON A REGULAR BASIS AND MUST BE REPLACED WHEN NECESSARY. See also “Care of your Sara 2000” section.

All references to the patient in these instructions refer to the person being lifted, and references to the attendant refer to the person who operates the hoist.

References to left and right of the hoist in these instructions are as viewed from the rear of the Sara 2000.

Use only Arjo slings that have been specifically designed for the Sara 2000.

Two types of sling can be used with the Sara 2000.

• **Standing Sling** - a single loop sling, used for supporting patients at the toilet, and to aid in the standing process. This is a one size sling, with variable adjustment using the different attachment clips.

• **Transfer Sling** - a single loop sling with buttock and leg support, used for easy and comfortable transporting of patients over short distances. The sling has variable adjustment using the different attachment clips and leg strap loops, (these being colour coded to relate them to the size of patient to be lifted).

**Commode Seat (accessory)** - for toileting patients at the chair side, or for patients who cannot be transported. The assembly comprises an easy to fit rigid commode seat, with removable commode pan. It is available from Arjo as an accessory.

Do not overload the Sara 2000 with a weight in excess of the approved lifting capacity of 180kg (400lbs).

The commode and seat (accessory) has a maximum weight limit of 160kg (350lbs) which must not be exceeded, so allowance must be made if using this facility.

The Sara 2000 may be used on gentle slopes with caution.

Care should be taken when lifting detachable components e.g. toilet seat, so as not to cause personal injury.

Do not attempt to manually lift the complete hoist.

A clinical assessment should be carried out by a qualified nurse or therapist before lifting patients who are non weight bearing. This also applies to patients who have limited shoulder movement or cannot hold on with one or both hands.

Patients who have curvature of the spine, or who are subject to muscle spasms may not be suitable, and should be carefully assessed before proceeding with the lift.

Although manufactured to a high standard the Sara 2000 and accessories should not be left for extended periods in humid or wet areas.

Do not under any circumstances spray the Sara 2000 or accessories (excluding slings) with water e.g. under the shower.

Some information contained in these instructions may become outdated, due to improvements made to this product in the future. If you have any questions regarding these instructions or your hoist, please contact Arjo or their approved distributor.

Arjo’s policy is one of continuous development, and therefore reserve the right to change specifications without notice.
Before commencing to lift the patient, ensure that all the actions and checks in this Preparation section are carried out.

Unpack the battery pack supplied, and fully charge it as described in “Battery Charging section”.

When the battery pack is charged, disconnect the mains power, then remove the pack from the charger and insert it fully into the Sara 2000 battery compartment, located at the lower rear of the mast. (See fig. 2). Electrical connection is made automatically.

Ensure that the green reset button, (situated at the top of the battery compartment), is pressed in. (See inset to fig 1).

Your Sara 2000 is now ready for use.
Before approaching the Patient

The attendant should always tell the patient what they are going to do, and have the correct size sling ready.

Ensure the patient support arms are raised or lowered sufficiently to avoid approaching the patient at eye level.

If required, the chassis legs may be opened to go around the chair, by operating the appropriate button on the control handset. (See fig. 3).

Note: If the handset button is released during any function, powered motion will stop immediately.

The chassis rear castors have brakes which can be foot operated if required, (see fig. 4), for example, when leaving the patient unattended, or to keep the Sara 2000 in position.

Using the Sara 2000 Slings

Select which sling will be required. (See the description of sling types in the ‘Introduction’ section).

Transfer Sling

With the patient in a sitting position, place the sling around the patient’s back, so that it lies approximately across the shoulder blades, with the patient’s arms outside the sling.

Bring the buttock/leg pieces of the sling carefully under the patient in readiness for connection, ensuring the pieces are not twisted. (See fig. 5).

Bring the Sara 2000 carefully up to the patient, placing the patient’s feet on the footrest, continuing forward, if possible, until the kneepad is just in contact with the patient’s knees and upper shins. Put on the brakes. (See fig. 6).

⚠️ When moving the Sara 2000 close to the patient, care must be taken to ensure the patient’s feet are not positioned between the footrest and floor.

continued .....
Lower the support arms carefully using the control handset, until the sling attachment lugs on the support arms are close enough to connect up one of the sling attachment clips. (See fig. 7).

Next, select the appropriate clip on the opposite end of the sling and connect up.

- **Note:** The patient should be supported by the sling, but not pulled forward too much.

- **Note:** Clip selection is at the discretion of the attendant, and should be relative to the size of the patient.

Connect the leg straps onto the leg connection knobs, (see fig. 8), once again by selecting the appropriate strap loop according to the size of patient to be lifted. Select one of the three colour coded loops to the outer end of the straps, ensuring the same colour loop is used on each side. The leg pieces should be pulled tight, but still be comfortable for the patient.

⚠ Ensure the sling clips are pulled well down onto the attachment lugs and secure, and that the leg pieces are correctly attached, before attempting to lift the patient.

If possible, the patient should now hold onto the grab handles with one or both hands. (See fig. 9).

**IMPORTANT:** Always check that the sling attachment clips are fully in position before and during the commencement of the lifting cycle, and in tension as the patient’s weight is gradually taken up.

Encourage the patient to assist all he / she can to raise from the chair, steady themselves, and to keep their head back. Operate the control handset to raise the support arms, this will elevate the patient.

- **Note:** If the handset button is released during lifting or lowering, powered motion will stop immediately.

continued .....
Raise the patient up, until they are supported in a sitting position - their feet being supported on the footrest. (See fig. 10).

- Note: Be careful not to raise the patient too high, as this will negate the comfort of the transfer sling.

Release the brakes, and transport the patient to the new position, i.e. wheelchair, bed, etc.

- Note: Transportation is possible with the chassis legs open or closed, but will be easier through doorways etc., with the chassis legs closed.

When the patient is seated in the new position, and you wish to remove the sling, unloop the leg support straps, unclip the shoulder support attachment clips, and remove the sling from around the patient.

⚠️ If the patient lacks sitting balance, and has been returned to the bed on the Sara 2000, a second attendant may be needed to support the patient while the sling is being removed. (See fig. 11).
Standing Sling

Position the sling around the patient’s back so that it lies 50mm (2 inches) or so, horizontally above the patient’s waistline, with the patient’s arms outside the sling. Ensure the support strap, (if fitted), is separated, brought loosely around the body, and is not twisted or trapped behind the patient’s back.

Fasten the support strap, (if fitted), securely. The strap should be tight, but comfortable for the patient. (See fig. 12).

- *Note: The support strap will assist in supporting the patient in the sling during the lifting procedure.*

Lower the support arms carefully, using the control handset, until the sling attachment lugs on the support arms are close enough to connect up to one of the sling attachment clips. (See fig. 14).

Next, select the appropriate clip on the opposite end of the sling and connect up.
- *Note: Clip selection is at the discretion of the attendant and should be relative to the size of the patient.*
- *The patient should be supported, but not pulled forward too much.*

Ensure the sling clips are pulled well down onto the attachment lugs and secure, before attempting to lift the patient.

If possible, the patient should now hold onto the grab handles with one or both hands. (See fig. 15).

continued ......

Fig. 12

Fig. 13

Fig. 14

Fig. 15
**IMPORTANT:** Always check that the sling attachment clips are fully in position before and during the commencement of the lifting cycle, and in tension as the patient’s weight is gradually taken up.

Encourage the patient to assist all he/she can to achieve a standing position, and to keep their head back.

Operate the control handset to raise the support arms. This will elevate the patient into a near standing position, their feet being supported by the foot rest. (See fig. 16).

- *Note: If the handset button is released during lifting or lowering powered motion will stop immediately.*

If the patient can stand sufficiently well to lock his/her knees in the normal way, their knees will come away from the reaction pad, and he/she can just lean back into the sling. (See fig. 17).

If the patient is “slumped”, he/she can still lean back into the sling, and be kept in the raised position by the knees being in contact with the kneepad. (See fig. 18).

Patient’s who have suffered a “stroke”, who can only hold on with one hand, or patient’s who cannot hold on at all, may still be lifted by the Sara 2000, but it will be necessary for the attendant, (or a second attendant), to hold the patient’s arm/arms down in front of the body during the lift. (See fig. 19).

Only use this method after a satisfactory professional assessment has been carried out on the individual patient.

*continued.....*
Patient’s wearing nylon nightclothes / dressing gowns are prone to be “slippery” - the sling may ride up the back, causing slight pressure under the arms. It may be necessary to hold the sling in position when lifting or lowering.

Note: Transportation is possible with the chassis legs open or closed, but it will be easier through doorways etc., with the chassis legs closed.

While the patient is raised, make any necessary adjustments to clothing, incontinence pads etc., before lowering again. Lower the patient carefully using the control handset.

Apply the chassis brakes if leaving the patient at the toilet, or if leaving the patient unattended.

When the patient is seated in the new position, and you wish to remove the sling, unclip the shoulder support attachment clips, then release the support strap.

Do not attempt to release the support strap while the patient is supported by the sling.

Remove the sling from the patient.

If the patient lacks sitting balance and has been returned to the bed on the Sara 2000, a second attendant may be needed to support the patient while the sling is being removed. (See fig. 11).

Commode Seat (Accessory)

For toileting patients at the chair side or for patients who cannot be transported, the use of the commode seat and frame is an easy alternative. The commode frame is inserted into the holes in the chassis at either side of the footrest, (see figs 1 and 20), once the patient has been lifted to a standing or near standing position in the manner previously described.

![Fig. 19](image)

![Fig. 20](image)

Removal of any clothing can be attended to, and the patient is then lowered down onto the commode seat. It is recommended that the patient is kept supported by the sling. The retractable commode pan, accessible from the rear of the seat, (see fig. 20), may be utilised, or removed to enable the patient to be positioned over a toilet. Apply chassis brakes if leaving the patient unattended.

continued .....
Emergency Lowering

In the unlikely event that the control handset fails to operate the hoist, with a patient still supported by the sling, provision for lowering has been made, using the “emergency lowering switch”, situated at the top right of the battery compartment. A label situated below the switch is for quick and easy recognition (See fig. 21). If pressure is released from the switch during use, lowering will stop. Only use this switch in an emergency, do not use it for normal function lowering.

The emergency lowering switch will only operate while the green reset button is in. The “automatic stop function” of the jib will not operate while using the emergency lowering button, so caution must be exercised if this facility has to be used.

If the emergency lowering switch has to be operated, the usage indicator seal will be broken, this identifies that the switch has been used, the hoist must then be withdrawn from use immediately and the Arjo Service Department or their appointed distributor contacted.

System Overload Fuse (resettable)

If the chassis legs (open/close) function or the lifting arms (raise or lower) function fail to operate when pressing the appropriate button on the control handset:-

Check that the ‘Green’ reset button is pressed in and check the battery pack is in a good state of charge, if the functions still fail to operate, check the system overload fuse (situated under the battery compartment). If the fuse has operated the switch section will protrude from its mount, press the switch in to reset. If the ‘cut out’ operates again withdraw the hoist from use and contact Arjo Service Department.

General Information

If the Sara 2000 is being used for “standing practice”, (accustoming the patient to the upright posture after long periods in bed), or for other reasons of instability, keep the sling sufficiently tight to give support, but without restricting movement.

- Note: The Sara 2000 is designed for quick, easy transfers from one sitting position to another, and to elevate a patient for toileting, repositioning, changing of incontinence pads, wound dressings, standing practise, etc.

The Sara 2000 is not intended for long periods of suspension.

Emergency Stop Button

If, in an emergency, you have to immediately stop any powered movement, (other than by releasing pressure on the control handset button), press the “emergency stop button”, situated at the top left of the battery compartment. (See fig. 21).

Once the emergency stop button has been operated, the green reset button will have to be re-engaged by pressing it in, before any powered movement can be utilised.
**Battery Charging**

The Sara 2000 incorporates a battery state indicator light, situated on the top of the battery compartment (see fig. 1). This light will flash intermittently when the battery pack needs recharging, and, although a small number of lifts are possible when the light flashes, it is a signal that the pack needs to be charged as soon as possible.

To ensure the Sara 2000 is always ready for use, it is recommended that a freshly charged battery pack is always available. This is achieved by having a second battery pack available, and keeping one on charge while the other is in use.

![Warning: Recharging the battery pack before it is totally discharged will prolong its life.]

When the battery state indicator light flashes, complete your lift / lower cycle, then pull out the battery pack from the battery compartment carefully.

![Warning: Hold the pack firmly to ensure it does not drop and become damaged, or cause personal injury.]

Place the battery pack on charge as follows:

1. Ensure the mains power is switched off.
2. Insert the battery pack into the charger unit and push firmly in, the charging connector will automatically couple, then switch on the mains power. A green light and an orange light will then be displayed (the green light indicates that mains power is connected, and will stay on until the mains power is disconnected. The orange light indicates battery state and will go out when the battery pack is fully charged) (see fig 22).

![Note: The battery pack may be left connected to the charger unit when it is fully charged without being damaged by overcharging, this will also ensure the battery is kept fully charged.]

Always disconnect the mains supply before disconnecting the battery.

When the battery pack is fully charged, disconnect the mains power, remove the pack from the charger, and insert it fully into the battery compartment. Electrical connection is made automatically.

Ensure the green reset button (situated at the top of the battery compartment) is pressed in (see figs. 1 and 21).

The Sara 2000 is now ready for use.

(continued...)
**Battery Charging - (continued)**

**Warnings**

- Only use the charger unit in a dry environment, do not use it in the bathroom.
- Do not expose the charger unit or battery pack to rain or spray and do not immerse in water.
- Do not obstruct ventilator slots on the battery charger otherwise overheating will result.
- No smoking or naked flames in battery vicinity.

The battery charger is for use only with Arjo supplied batteries that are to be used with the Sara 2000.

The battery charger is for use with sealed lead acid batteries only.

Under no circumstances should the charger be used to attempt to recharge non-rechargeable batteries.

To change the power cord, the charger must be sent to the manufacturer.

**General Safety Practices For Batteries**

- Only use the charger unit supplied with the Sara 2000.
- Do NOT charge batteries in a sealed container.
- Do NOT place batteries near, or dispose of, in a fire.
- Do NOT short circuit a battery.
- Do NOT store batteries at temperatures in excess of 60°C (140°F).
- Do NOT crush, puncture, open, dismantle or otherwise mechanically interfere with batteries.

- Should the battery casing become cracked, and electrolyte come into contact with skin or clothing, wash immediately with water.
- If the electrolyte contacts the eyes, wash immediately with copious amounts of water, and seek medical attention.
- When disposing of batteries, contact the appropriate local authority for advice.

**Storage of Batteries**

When stored, a battery will slowly self discharge. Batteries that are not in use or recharge should be kept cool but not under 0°C (32°F). Recharge stored batteries every six months.
How often the following actions are taken depends on how often the equipment is used. Unless otherwise stated, it is a good idea to begin once a week and then rely on experience to decide how often it is necessary in the future.

The slings should be checked, and if necessary washed according to instructions on the sling, also refer to sling instruction sheet MAX.01520.INT.

With regard to laundering, slings should not be classified as linen, but as an accessory to a patient transfer hoist and therefore classified as a medical device. Slings should be cleaned and disinfected only in strict accordance with the manufacturers instructions.

Mechanical pressure should be avoided during the washing and drying procedure e.g. rolling or pressing, as these can damage parts vital to the safe and comfortable operation of the sling.

Washing and drying temperatures must not exceed 80°C (176°F). Wash using normal detergents, do not iron. Also refer to Sling Instruction sheet MAX.01520.INT.

It is recommended that Arjo Patient hoists, equipment, accessories and slings are regularly cleaned. If the slings, hoists and equipment needs cleaning, or are suspected of being contaminated, follow the cleaning and/or disinfection procedures recommended below, before re-using the equipment. This is especially important when using the same equipment for another patient, to minimise the risk of cross infection.

For cleaning your hoist, equipment and accessories wipe down with a damp cloth using warm water to which a disinfectant/cleaner has been added e.g. “ARJO CLEAN” - disinfectant/cleaner or equivalent.

Note: “ARJO CLEAN” - disinfectant cleaner is available from Arjo Ltd. or their approved distributors.

Do not over wet areas of the product which could cause problems with electrical components or internal corrosion.

If a hot air dryer is used to dry the hoist, the temperature must not exceed 80°C (165°F).

Do not use petroleum based solvents or similar, since this may damage plastic parts.

For disinfection of contaminated hoists, equipment and accessories, use the preferred method of wiping the product completely with “hard surface disinfectant wipes” that are supplied impregnated with a 70% v/v solution of Isopropyl Alcohol.

Note: A rubbing action will be necessary when using the wipes to promote effective disinfection of the surfaces.

IMPORTANT: Cleaning and disinfection products must be used in accordance with the manufacturers instructions and suitable eye, hand and clothing protection must be worn at all times when handling disinfectants.

Note: 70% v/v Isopropyl Alcohol wipes have been proved to be effective against MRSA and several other micro-organisms under light soiling conditions.

Ensure that the battery pack is always in a good state of charge.

Check that the hoist can be propelled in a normal manner, making sure that the castors are quite free in their movement, as clogging by hair and fluff can occur, also check that the tread of the castor is not damaged.

Ensure that the castors are firmly secured to the chassis.

(continued...)
Carefully inspect all plastic parts, in particular where there is personal contact with the patient’s body, ensure that no cracks or sharp edges have developed which could injure the patient’s skin or become unhygienic.

It is essential that the slings, their straps and attachment clips are carefully inspected. If the slings or straps are frayed, or the clips damaged, the sling should be withdrawn from use immediately and replaced.

Check that all external fittings are secure and that all screws and nuts are tight.

Ensure that all instruction labels are firmly attached and in good readable condition.

**Periodic Testing**

For normal operation - raise and lower the jib using the control handset, this is to test for full and efficient movement.

**Automatic Stop**

With the support arms raised well above their lowest position, using the control handset lower the support arms, and at the same time with your other hand hold the support arms up briefly. (See fig. 23). The motor will stop while the arms’ weight is held. Stop the powered movement after a second or two, and lower the arms carefully. This check is for the correct function of the automatic stop.

**Emergency Stop**

Test the emergency stop facility by operating the control handset to lift or lower the support arms, and whilst operating, press in the emergency stop button. (See fig. 21). Powered movement should stop immediately.

Reset to normal function by pressing the green reset button. (See fig. 21). Repeat for chassis legs opening / closing function, and reset the button.

**Adjustable Width Chassis Function**

Open and close the chassis legs using the control handset to check for full and efficient movement.

**General Hoist Condition**

A general visual inspection of all external parts should be carried out, and all functions should be tested for correct operation, to ensure that no adverse damage has occurred during use.

If in any doubt about the correct functioning of the Sara 2000, withdraw it from use and contact Arjo Service Department.

(continued...)

(continued...)
Cleaning and Disinfecting the Toilet Commode Chair and Frame

For exterior areas of the seat and frame the “hard surface disinfectant wipes” mentioned above will be very effective, but for internal and crevice areas of the equipment Arjo recommend that the seat and frame is immersed in a disinfectant / cleaning solution and cleaned in the following manner:-

- Note:- “ARJO CLEAN” - Disinfectant / Cleaner is available from Arjo Limited, or their approved distributor.

ALWAYS WEAR PROTECTIVE GLOVES AND EYE PROTECTION WHEN USING DISINFECTANT.

Always read the instructions on the disinfectant / cleaner container before using.

Mix a suitable quantity of solution in the bath tub (always check dilution rate on disinfectant / cleaner container).

Remove the plastic commode seat from the seat frame by pulling the rear edge up sharply to disengage the locating lugs (see Fig. 24). Slide the seat forwards a short distance until clear of the frame tubes and lift away.

Put the seat into the disinfectant solution to “soak” and then place the seat frame into the bath.

Using an appropriate long handled, stiff bristled, ‘bottle type’ brush, clean the inside of the commode pan support tubes thoroughly.

Clean the remainder of the seat frame, paying particular attention to recesses in the framework.

- Note:- A scrubbing action is necessary as well as the disinfectant / cleaner action to sanitise any surface.

Clean the commode seat, then drain the bath.

Rinse all parts with clean water and dry with a disposable cloth.

Thoroughly clean the brush in a fresh solution of the disinfectant/cleaner. Rinse well with clean water. Dry the brush and store ready for the next cleaning operation.

To refit the commode seat, locate the seat holes over the seat frame tubes, and align the location lugs over the rear cross bar of the seat frame as shown in Fig. 16. Apply sharp downward blows onto the rear of the seat, (as shown in Fig. 26), in two places directly above the location lugs, until the seat ‘snaps’ back into place.

Always ensure the seat is secure before allowing a patient to use it.
Servicing Advice

The components listed below are critical to the safe operation of the hoist and must be regularly examined and replaced at the following intervals.

Actuator Pins - Replace every year.

Spare parts, if required are available from Arjo or their approved distributors.

Special tools are required for certain component replacement.

The simplest; safest and most effective way to maintain your product in good working order, is to have it methodically and professionally serviced by an Arjo approved engineer using Arjo approved spare parts.

For information on service and maintenance contracts, please contact your local Arjo distributor.
Component Weights

<table>
<thead>
<tr>
<th></th>
<th>kg</th>
<th>lbs</th>
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<tbody>
<tr>
<td>Sara 2000 complete</td>
<td>60</td>
<td>132.3</td>
</tr>
<tr>
<td>Battery pack</td>
<td>3.8</td>
<td>8.4</td>
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</tbody>
</table>

Electrical

- Battery type ......................................................... (Rechargable-sealed lead acid)
- Battery part number .............................................. KKA 1100-04
- Battery capacity .................................................. 24V 4Ah
- Hoist - Protection class ......................................... IPX4
- Handset - Protection class ....................................... IP67
- Hoist nominal voltage ............................................ 24V
- Fuse - overload ..................................................... 10A (thermal cutout) - resettable

Medical Equipment: type protection against electrical shock in accordance with IEC 601-1

Arjo patient handling products meet the requirements of Electromagnetic Compatibility (EMC) as stated in clause 12.5 of the Medical Devices Directive 93/42/EEC

<table>
<thead>
<tr>
<th></th>
<th>Duty cycle</th>
<th>Max volts</th>
<th>Max amps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lift Actuator</td>
<td>10-15% • 6-9min/hr</td>
<td>24</td>
<td>15</td>
</tr>
<tr>
<td>Chassis Actuator</td>
<td>10% • 6min/hr</td>
<td>24</td>
<td>1.85</td>
</tr>
</tbody>
</table>

Environment

- Air humidity/storage ...................................................... 20°C (68°F) 80%
- Usage temperature (ambient) ........................................ +10°C (34°F) to +60°C (204°F)

(continued...)
All dimensions in millimetres (equivalent in inches)
We strongly advise and warn that only Company Designated Parts, which are designed for the purpose, should be used on equipment and other appliances supplied by the Company, to avoid injuries attributable to the use of inadequate parts.

The Company’s Conditions of sale make specific provision confirming no liability in such circumstances.

Our policy is one of continuous development, and we therefore reserve the right to change specifications without notice.