Enquiry Form for Automated Parking System

Please return per email to info@lodige.com

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Contact:

Name: .....
Address: .....
EMail: .....
Project name: .....
Location: .....

- ☐ Planner
- ☐ Architect
- ☐ Client
- ☐ Consultant
- ☐ Other: .....

Site Information

☐ New building ☐ Existing Building

☐ Public building ☐ Residential ☐ Offices ☐ Hotel Other: .....

Start of planning phase: .....
Building phase: .....
Completion date: .....
System budget: .....

Type of User:

☐ General public ☐ Closed circle ☐ Disabled parking required

Parking System Information

Available area .....m Length **x** m width.....

Required number of parking positions: Mid-range vehicles .....
Large SUVs .....

Do you plan to install EV charging? ☐ No ☐ Yes (number of spaces required) .....

Throughput (parking procedures) required per hour .....

☐ Free standing ☐ Integrated into a building
☐ Above ground ☐ Underground ☐ Both

Building height: ☐ Max. .....m ☐ No restrictions
Building depth: ☐ Max. .....m ☐ No restrictions

Are there restricting building columns or walls?
☐ No ☐ Yes (please indicate on drawing)

Are there other constraints requiring consideration?
☐ No ☐ Yes (please list in comments below)

Comments:

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