

TO: IDEC Corporation

Company: \_\_\_\_\_

TEL: \_\_\_\_\_

No. of Control Box



Contact Person: \_\_\_\_\_

FAX: \_\_\_\_\_

Select the required specifications by checking the checkboxes, and specify the details.

### Control box size

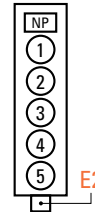
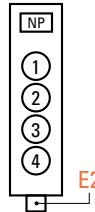
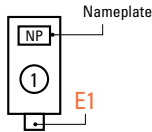
EC2B-110

EC2B-210

EC2B-310

EC2B-410

EC2B-510



### Nameplate (NP)

Material: Acrylic (53 mm × 12 mm, plate thickness 2 mm)  
 Legend color: black letter, white background  
 Maximum no. of letters: 19 letters per line (up to 2 lines)

No nameplate

1 line

2 lines

1st line	
2nd line	

### Control Units

Position	Control Unit Part No.	Control Unit Nameplate
①		<input type="checkbox"/> ON <input type="checkbox"/> OFF <input type="checkbox"/> START <input type="checkbox"/> STOP <input type="checkbox"/> EMERGENCY STOP <input type="checkbox"/> OFF ON <input type="checkbox"/> HAND AUTO <input type="checkbox"/> HAND OFF AUTO <input type="checkbox"/> Blank <input type="checkbox"/> No nameplate <input type="checkbox"/> Specify letters (    )
②		<input type="checkbox"/> ON <input type="checkbox"/> OFF <input type="checkbox"/> START <input type="checkbox"/> STOP <input type="checkbox"/> EMERGENCY STOP <input type="checkbox"/> OFF ON <input type="checkbox"/> HAND AUTO <input type="checkbox"/> HAND OFF AUTO <input type="checkbox"/> Blank <input type="checkbox"/> No nameplate <input type="checkbox"/> Specify letters (    )
③		<input type="checkbox"/> ON <input type="checkbox"/> OFF <input type="checkbox"/> START <input type="checkbox"/> STOP <input type="checkbox"/> EMERGENCY STOP <input type="checkbox"/> OFF ON <input type="checkbox"/> HAND AUTO <input type="checkbox"/> HAND OFF AUTO <input type="checkbox"/> Blank <input type="checkbox"/> No nameplate <input type="checkbox"/> Specify letters (    )
④		<input type="checkbox"/> ON <input type="checkbox"/> OFF <input type="checkbox"/> START <input type="checkbox"/> STOP <input type="checkbox"/> EMERGENCY STOP <input type="checkbox"/> OFF ON <input type="checkbox"/> HAND AUTO <input type="checkbox"/> HAND OFF AUTO <input type="checkbox"/> Blank <input type="checkbox"/> No nameplate <input type="checkbox"/> Specify letters (    )
⑤		<input type="checkbox"/> ON <input type="checkbox"/> OFF <input type="checkbox"/> START <input type="checkbox"/> STOP <input type="checkbox"/> EMERGENCY STOP <input type="checkbox"/> OFF ON <input type="checkbox"/> HAND AUTO <input type="checkbox"/> HAND OFF AUTO <input type="checkbox"/> Blank <input type="checkbox"/> No nameplate <input type="checkbox"/> Specify letters (    )

### Lead-in Fitting (E1/E2)

Without specification  
(standard reducer)

With specification

		EC2B-110, 210, 310		EC2B-410, 510			
		UL/c-UL, IECEx/ATEX certified		NPT 3/4			
		NPT 3/4		NPT 1			
		EC2B-110, 210, 310		EC2B-410, 510			
Code	Cable lead-in method	Check	Specification	Code	Cable lead-in method		
<b>E1</b>	Reducer	<input type="checkbox"/>	M16	<b>E2</b>	Reducer	<input type="checkbox"/>	M25
		<input type="checkbox"/>	M20			<input type="checkbox"/>	M32
		<input type="checkbox"/>	M25			<input type="checkbox"/>	M40
		<input type="checkbox"/>	M32			<input type="checkbox"/>	NPT 3/4
		<input type="checkbox"/>	NPT 1/2			<input type="checkbox"/>	NPT 1
		<input type="checkbox"/>	NPT 3/4			<input type="checkbox"/>	NPT 1 1/4
		<input type="checkbox"/>	NPT 1				

• Specify wiring diagram when wiring is required.

• Specify when other accessories are required.