

# Free Customer Tech Support - Sidewinder Engineering

## Drive System Gearing Analysis - Project Worksheet

### Instructions

Fill out the information on this form as completely as possible. The more details you provide, the more accurately our Tech Department can suggest your ideal gearing choices.

Builder Name _____	
Builder Address _____	
City _____	State _____ Zip _____
Work Phone _____	Project Start Date _____
Home Phone _____	Estimated Finish Date _____
Cell Phone _____	Project Estimated Budget \$ _____
E-Mail Address _____	
Web Forums Actively Visited (1) _____	
Web Forums Actively Visited (2) _____	

### Project Type

☐ Quad    ☐ Trike    ☐ Cycle    ☐ Quad/Cycle Combo    ☐ Go-Kart    ☐ Sprint Car

### Project Category & Purpose (Check Every Appropriate Box)

<input type="checkbox"/> ProLevel	<input type="checkbox"/> Amateur	<input type="checkbox"/> Competition	<input type="checkbox"/> Play
<input type="checkbox"/> 300 Ft. Drags	<input type="checkbox"/> 1/8 Mile Drags	<input type="checkbox"/> 1/4 Mile Drags	<input type="checkbox"/> Duner
<input type="checkbox"/> Show Quad	<input type="checkbox"/> Sand Rail	<input type="checkbox"/> Show Bike	<input type="checkbox"/> Street Gunner
<input type="checkbox"/> Off-Road/MX	<input type="checkbox"/> Desert Sled	<input type="checkbox"/> Mudder	<input type="checkbox"/> Hillclimber
<input type="checkbox"/> Daily Driver	<input type="checkbox"/> City	<input type="checkbox"/> Long Range Highway	<input type="checkbox"/> Other _____

☐ Powerplant (Year/Model/CC) \_\_\_\_\_

☐ Chassis (Year/Model) \_\_\_\_\_

☐ Swingarm Extension \_\_\_\_\_

☐ Tire Types & Sizes \_\_\_\_\_

☐ Pipe Type \_\_\_\_\_

☐ Current Gearing \_\_\_\_\_

☐ Requested Gearing \_\_\_\_\_

☐ Top End Speed Required (mph) \_\_\_\_\_

☐ Rear Suspension Travel \_\_\_\_\_

☐ Other Mods \_\_\_\_\_

☐ Power Delivery Wanted    ☐ More Top End    ☐ More Bottom End

Estimated H.P. \_\_\_\_\_

Wheelbase \_\_\_\_\_

Rider's Weight \_\_\_\_\_

Vehicle Weight \_\_\_\_\_

Chain Size

☐ 420    ☐ 428    ☐ 520  
☐ 525    ☐ 530    ☐ 630

### For Sidewinder Internal Company Use Only

☐ Date Submitted to Engineering \_\_\_\_\_

☐ Agent assigned to this project \_\_\_\_\_

☐ Date analysis completed \_\_\_\_\_

☐ Final Recommendation \_\_\_\_\_

☐ Dept. Manager approval \_\_\_\_\_

☐ Final customer contact date \_\_\_\_\_

### How to Submit Form

You may mail this form to Sidewinder Products, 601 Sidwell Court, St. Charles, Illinois 60174 or scan and E-Mail to: [tech@SidewinderSprockets.com](mailto:tech@SidewinderSprockets.com) or call 630-513-1000 for the current fax # to our Engineering Department.