



# Adaptive Components Pty Ltd

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## Retrofit Questionnaire

Thank you for your interest.

Please fill out this form, including as much information as possible, and fax back to:  
 03 9553 0455, Attn: Kelly Reed

This information will be used to develop a preliminary proposal with budgetary costs for retrofitting existing CMS or VMS products to an LED based NTCIP compliant DMS.

Regards,  
 Adaptive Components

### General Information

Primary Contact Name:	
Company or State Department Name:	
Address:	
Email:	
Phone #	
Fax #	
Is there a local contractor with a maintenance contact for the current signs? Who?	
What is your timeline for completion:	
Lane closure required to service the sign?	

### Sign Configuration

Number of Signs:	
DMS Manufacturer and Model #	
Enclosures are front access or walk-in:	
Matrix Type and Size:	
Character Height:	
Pixel pitch: (distance between pixels)	
Ground control box: (YES/NO)	

# Retrofit Questionnaire



<b>Communication</b>	
Current system NTCIP compliant: (YES/NO)	
NTCIP compliance a requirement: (YES/NO)	
Host Software Vendor:	
Are there plans for upgrading the host SW: (yes/no – if yes, when?)	
Communication link to the DMS:	
<b>Available Documentation</b>	
Wiring Diagrams: (YES/NO)	
Dimensional drawings of enclosures: (YES/NO)	
Dimensional drawings of the display module: (YES/NO)	
Available service components: (Display module, power supplies, controller)	
<b>Cabinet</b>	
Any significant corrosion?	
Lens material scratched, yellowed or otherwise damaged?	
Any other deterioration or damage that could affect the retrofit?	
Power service available:	

**Any Maintenance or other related issues:**

# Retrofit Questionnaire



List all sign locations

1.
2.
3.
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15.