**Table 20**

**TECHNICAL SPECIFICATION OF GASEOUS FUELLED VEHICLES KIT (DEDICATED / BI-FUEL / DUAL FUEL / DEDICATED DUAL FUEL AS APPLICABLE)**

|  |  |  |
| --- | --- | --- |
| 1. **Details of Kit Manufacturer / Supplier / Installer** |  | |
| 1. Name of the Manufacturer |  | |
| 1. Address |  | |
| 1. Telephone No. & Fax No. |  | |
| 1. **Gas Kit Identification** |  | |
| 1. Identification No. |  | |
| 1. Variants, if any |  | |
| 1. Fuel system ( Dedicated / Bi-Fuel / Dual Fuel / Dedicated Dual Fuel) |  | |
| 1. Type of Dual- fuel system (Type 1A / 1B / 2A / 2B / 3B) |  | |
| 1. Fuel ( Gas Fuel (Specify Name of fuel) & Gasoline / Diesel) |  | |
| 1. **Cylinder Details (PESO approved / endorsed)** |  | |
| 1. Name of manufacturer |  | |
| 1. Identification No. |  | |
| 1. Type |  | |
| 1. Working pressure (kg/cm2 ) |  | |
| 1. Max. test pressure (kg/cm2 ) |  | |
| 1. Cylinder capacity (water equivalent) ( liters) and diameter (mm) |  | |
| 1. Approval reference from PESO (PESO compliance with Date) |  | |
| 1. Number of Cylinders fitted ( schematic drawing) |  | |
| 1. Tare weight of each cylinder (kg) |  | |
| 1. Approval reference ( PESO compliance with Date) |  | |
| 1. **Cylinder Valve (s) / Shutoff valve (PESO approved / endorsed)** |  | |
| 1. Name of manufacturer |  | |
| 1. Model name/Identification No. |  | |
| 1. Type |  | |
| 1. Working pressure (kg/cm2 ) |  | |
| 1. Max. test pressure (kg/cm2 ) |  | |
| 1. Approval reference from PESO (PESO compliance with Date) |  | |
| 1. **Solenoid Valve / Automatic shutoff valve** |  | |
| 1. Name of manufacturer |  | |
| 1. Model Name / Identification No. |  | |
| 1. Type |  | |
| 1. Working pressure (kg/cm2 ) |  | |
| 1. Max test pressure (kg/cm2 ) |  | |
| 1. Approval reference (Test Report / Approval Number) |  | |
| 1. **Petrol Solenoid Valve** |  | |
| 1. Name of manufacturer |  | |
| 1. Model Name / Identification No. |  | |
| 1. Type |  | |
| 1. Working pressure (kg/cm2 ) |  | |
| 1. Max test pressure (kg/cm2 ) |  | |
| 1. **Refilling valve / Refilling Receptacle** |  | |
| 1. Name of the manufacturer |  | |
| 1. Model name / Identification No. |  | |
| 1. Type |  | |
| 1. Working pressure (kg/cm2 ) |  | |
| 1. Max test pressure (kg/cm2 ) | |  |
| 1. **Pressure Regulator** | |  |
| 1. Name of manufacturer | |  |
| 1. Model name / Identification No. | |  |
| 1. Type | |  |
| 1. Inlet pressure (kg/cm2 ) | |  |
| 1. Outlet pressure (kg/cm2 ) | |  |
| 1. No. of stages | |  |
| 1. Approval reference (Test Report / TAC compliance with Date) | |  |
| 1. **Vaporizer / Heat exchanger (for LNG)** | |  |
| 1. Name of manufacturer | |  |
| 1. Model name / Identification No. | |  |
| 1. Type | |  |
| 1. Inlet pressure (kg/cm2) | |  |
| 1. Outlet pressure (kg/cm2) | |  |
| 1. Approval reference (Test Report / Approval Number) | |  |
| 1. **Filter** | |  |
| 1. Name of manufacturer | |  |
| 1. Model name / Identification No. | |  |
| 1. Type | |  |
| 1. Inlet pressure (kg/cm2 ) | |  |
| 1. Outlet pressure (kg/cm2 ) | |  |
| 1. **Oil Pump or Lubrication System, if applicable** | |  |
| 1. Name of manufacturer | |  |
| 1. Type | |  |
| 1. **High Pressure Tubing** | |  |
| 1. Name of manufacturer | |  |
| 1. Model name / Identification No. | |  |
| 1. Type ( rigid / flexible) | |  |
| 1. Working pressure (kg/cm2 ) | |  |
| 1. Max. test pressure (kg/cm2 ) | |  |
| 1. Outer diameter / Inner Diameter (mm) | |  |
| 1. Material | |  |
| 1. Approval reference (Test Report / Approval Number) | |  |
| 1. **Low Pressure Tubing** | |  |
| 1. Name of manufacturer | |  |
| 1. Model name / Identification No. | |  |
| 1. Type | |  |
| 1. Working pressure (kg/cm2 ) | |  |
| 1. Max test pressure (kg/cm2 ) | |  |
| 1. Outer diameter / Inner Diameter (mm) | |  |
| 1. Material | |  |
| 1. Approval reference (Test Report / Approval Number) | |  |
| 1. **Gas-Air Mixer** | |  |
| 1. Name of manufacturer | |  |
| 1. Model name / Identification No | |  |
| 1. Type & drawing | |  |
| 1. Venturi Size (mm) | |  |
| 1. Approval reference (Test Report / Approval Number) | |  |
| 1. **Gas Injector** | |  |
| 1. Name of manufacturer | |  |
| 1. Model name / Identification No | |  |
| 1. Type & drawing | |  |
| 1. Injector flow specs | |  |
| 1. Approval reference (Test Report / Approval Number) | |  |
| 1. **ON / OFF Switch (Fuel selector switch)** | |  |
| 1. Name of manufacturer | |  |
| 1. Model name / Identification No | |  |
| 1. **Ignition System** | |  |
| 1. Name of manufacturer | |  |
| 1. Type of Ignition System | |  |
| 1. Spark plug gap, mm | |  |
| 1. Make | |  |
| 1. Identification | |  |
| 1. **Wiring Harness** | |  |
| 1. Name of manufacturer | |  |
| 1. Electrical circuit diagram / Detail layout | |  |
| 1. Approval reference (Test Report / Approval Number) | |  |
| 1. **Interfacing Unit (ECU)** | |  |
| 1. Name of manufacturer | |  |
| 1. Identification No. | |  |
| 1. Type | |  |
| 1. **Ignition Timing Advancer** | |  |
| 1. Name of manufacturer | |  |
| 1. Type | |  |
| 1. Timing on Gas mode | |  |
| 1. Timing on baseline fuel. | |  |
| 1. **Fuel selector switch** | |  |
| 1. Name of manufacturer | |  |
| 1. Model No | |  |
| 1. Type | |  |
| **22 .Fuel flow actuation mechanism (Mechanical / Electronic)** | |  |
| 1. Brief description of system (Attach Annexure) | |  |
| 1. Schematic layout (Attach Drawing) | |  |
| 1. Identification of critical components of Kit, including ECU, Lambda sensor, Pressure sensor, temperature Sensor etc with Make and Identification number) (attach Annexure) | |  |
| **23. Brief Description of System Including Dimensional Layout for Cylinder and other kit components installation ventilation details etc.** | |  |
| 1. **Joints and connections** | |  |
| 1. Name of manufacturer | |  |
| 1. Type | |  |
| 1. Number of Joints and connections represented on Drawing (Attach Drawing) | |  |
| **25. Catalytic Converter OE** | |  |
| 1. Make & identification Replaced | |  |
| 1. Make & identification | |  |
| 1. **Refilling valve interlocking switch (NA for LNG)** | |  |
| 1. Name of manufacturer | |  |
| 1. Identification No. | |  |
| 1. Type | |  |
| 1. **Current limiting Device (Fuse)** | |  |
| 1. Name of manufacturer | |  |
| 1. Identification No. | |  |
| 1. Voltage / current rating | |  |
| 1. Type | |  |
| 1. Approval reference (Test Report / Approval Number) | |  |
| 1. **Indicator** | |  |
| 1. Pressure Indicator (If provided) | |  |
| 1. Name of manufacturer | |  |
| 1. Identification No. | |  |
| 1. Type | |  |
| 1. Temperature Indicator (for LNG) | |  |
| 1. Name of manufacturer | |  |
| 1. Identification No. | |  |
| 1. Type | |  |
| 1. **Service shut off valve** | |  |
| 1. Name of manufacturer | |  |
| 1. Identification No. | |  |
| 1. Type | |  |
| 1. **Compartment/Sub-compartment / Gas tight housing** | |  |
| 1. Name of manufacturer | |  |
| 1. Identification No | |  |
| 1. Type | |  |
| 1. Material used | |  |
| 1. Approval reference (Test Report / Approval Number) | |  |
| 1. **Conduit** | |  |
| 1. Name of manufacturer | |  |
| 1. Identification No. | |  |
| 1. Inner & outer diameter | |  |
| 1. Type | |  |
| 1. Approval reference (Test Report / Approval Number) | |  |
| 1. **Details of non-moisture retaining hard rubber / equivalent material padding / lining provided for inner side of the cylinder mounting band(s)** | |  |
| 1. Name of manufacturer | |  |
| 1. Identification No. | |  |
| 1. Type | |  |
| 1. Number of bands / cylinder ( Should be part of layout ) | |  |
| 1. Approval reference (Test Report / Approval Number) | |  |
| 1. **Battery cut off switch (if applicable)** | |  |
| 1. Name of manufacturer | |  |
| 1. Identification No. | |  |
| 1. Type | |  |
| 1. **Labels - Number and position** | |  |
| 1. **First Aid Box** | |  |
| 1. **Fire Extinguisher ( Number and Type)** | |  |
| 1. **Idle rpm** | |  |
| 1. **Brief Description of System Including Dimensional Layout for Cylinder and other kit components installation ventilation details etc.** | |  |
| 1. **Any other information** | |  |
| Note: **In case of OE fitment, if any of the above information is already covered in the information submitted as per AIS- 007, only the reference need be given and it is not necessary to duplicate the information.** | | |
| \* Mention NA wherever not applicable | | |