

# DATA SHEET

Non-invasive Electromagnetic Therapy Device TOR  
BEMP941523.001ПC



## Table of content

1. General information about device . . . . .	4
2. Basic technical data . . . . .	5
3. Composition of the device . . . . .	6
4. Resources, service and storage life and manufacturer's warranty . . . . .	7
5. Packing certificate . . . . .	8
6. Acceptance certificate . . . . .	9
7. Motion of the product during operation . . . . .	10
8. Repair . . . . .	12
9. Special marks . . . . .	16

## 1 | GENERAL INFORMATION ABOUT DEVICE

Name of the device	NON-INVASIVE ELECTROMAGNETIC THERAPY DEVICE TOR
Designation	BEMP.941523.001
Factory number	_____
Date of manufacture	_____
SW version	_____
Manufacturer	GRANIT Concern JSC

## 2 | BASIC TECHNICAL DATA

2.1. Basic technical characteristics of electronic unit TOR are shown in table 1.

TABLE 1	
PARAMETERS AND UNITS OF MEASUREMENT	VALUE
Rated power of device, VA	150
Time to failure, h	Not less than 6000
Rated supply voltage at 50Hz, V	220 (±10%)
Environmental parameters: • Temperature; • Air relative humidity; • Atmospheric pressure	from -20 °C to +40 °C up to 80% at 40 °C 650 to 800 mmHg
Dimensions of electronic unit without projected parts (depth x width x height), mm	205,4x191,1x432 Acceptable deviation +10 mm
Weight of electronic unit, kg	8,840 Acceptable deviation +10 mm

2.2. Information about the content of precious metals.

The NON-INVASIVE ELECTROMAGNETIC THERAPY DEVICE TOR does not contain precious metals. (There is no information on the content of precious metals in components).

### 3 | COMPOSITION OF THE DEVICE

3.1. The device composition BEMP.941523.001 is shown in table 2.

TABLE 2

NAME	DESIGNATION	QUAN TITY	REMARK
BEMP.941523.002	BEMP.941523.002	1	
Power supply cable		1	
Grounding wire	BEMP.685614.024CБ	1	length 5 m, with green-yellow insulation, multi-core 1 mm <sup>2</sup>
Accessories, including: - thermal fuse 2 A 250 V		1	5x20 mm
Operation manual	BEMP.941523.001PЭ	1	
Data sheet	BEMP.941523.001ПС	1	
Packing	BEMP.305646.145	1	

### 4 | RESOURCES, SERVICE AND STORAGE LIFE AND MANUFACTURER'S WARRANTY

4.1. The manufacturer guarantees that the quality of the product complies with the requirements of the technical specifications BEMP.941523.001, provided that the consumer observes the conditions and rules for storage and transportation and operation established by the operational documentation.

4.2. Warranty period of storage of the product - 18 months from the date of signing shipment certificate.

Guaranteed service life: 12 months from the date of its commissioning within the warranty period of storage.

4.3. Warranties do not apply to products in which the detected defects were due to mechanical damage received as a result of careless or undue handling and non-compliance with the conditions and rules of operation specified in BEMP.941523.001 PЭ.

4.4. Within the warranty periods specified in clause 4.2, manufacturer will remove consequences of supply of defected device to customer or undue fulfilment of works, eliminate products defects free of charge, replace products of inadequate quality at its own expense. Time, within which devices can't be used due to their failure, is not included into warranty period.

4.5 Product service life: 5 years

4.6. Warranty maintain and warranty repair should be carried out by GRANIT Concern JSC at the following address: 119019, Moscow city, Gogolevsky Boulevard, 31, building 2, tel.: 8 (495) 642-97-42.

## 5 | PACKING CERTIFICATE

NON-INVASIVE ELECTROMAGNETIC THERAPY DEVICE TOR

BEMP.941523.001 № \_\_\_\_\_ packed  
Factory number

\_\_\_\_\_ in accordance with requirements specified  
Manufacturer in valid technical documentation.

Warehouse supervisor

\_\_\_\_\_ Position \_\_\_\_\_ Personal signature \_\_\_\_\_ Print full name  
\_\_\_\_\_  
Month, year

## 6 | ACCEPTANCE CERTIFICATE

NON-INVASIVE ELECTROMAGNETIC THERAPY DEVICE TOR

BEMP.941523.001 № \_\_\_\_\_ packed  
Factory number

and accepted in accordance with valid technical documentation, requirements of BEMP.941523.001 and found fit for operation.

The device is sealed \_\_\_\_\_  


Head of Technical Control Department

Place for seal \_\_\_\_\_  
Personal signature \_\_\_\_\_ Print full name \_\_\_\_\_  
\_\_\_\_\_  
Month, year

Company manager

Place for seal \_\_\_\_\_  
Personal signature \_\_\_\_\_ Print full name \_\_\_\_\_  
\_\_\_\_\_  
Month, year

Customer/Representative MA  
(if any)

Place for seal \_\_\_\_\_  
Personal signature \_\_\_\_\_ Print full name \_\_\_\_\_  
\_\_\_\_\_  
Month, year

## 7 | MOTION OF THE PRODUCT DURING OPERATION

7.1. Information about the movement of device during operation, the technical condition at the time of transfer and information about the fixing of the product are specified in tables 3 and 4, respectively.

**TABLE 3 – Transfer and acceptance of the device**

DATE	DEVICE CONDITION	BASIS (DOCUMENT NAME, NUMBER AND DATE)	ORGANIZATION, POSITION AND SIGNATURE		REMARK
			TRANSFERRING PERSON	ACCEPTING PERSON	

*Note – The table is filled in during the operation of device.*

**TABLE 4 -Information about fixing the device upon operation**

NAME OF DEVICE (COMPONENT) AND DESIGNATION	POSITION, SURNAME AND INITIALS	BASIS ( DOCUMENT NAME, NUMBER AND DATE)		REMARK
		FIXING	DETACHMENT	

*Note – The table is filled in during the operation of device.*

## 8 | REPAIR

### 8.1. Short records on performed repair

NON-INVASIVE ELECTROMAGNETIC THERAPY DEVICE TOR

BEMP.941523.001 № \_\_\_\_\_  
Factory number

\_\_\_\_\_  
Company, date

Total time since new \_\_\_\_\_  
Parameter that characterizes the resource or service life

Operation time after last repair \_\_\_\_\_  
Parameter that characterizes the resource or service life

Reason for repair \_\_\_\_\_

Information on performed repair \_\_\_\_\_  
Type of repair and brief information about repair

\_\_\_\_\_

\_\_\_\_\_

### 8.2. Acceptance certificate and guarantees

NON-INVASIVE ELECTROMAGNETIC THERAPY DEVICE TOR

BEMP.941523.001 № \_\_\_\_\_  
Factory number

accepted in accordance with the current technical documentation and recognized as fit for operation.

The repair contractor guarantees the compliance of the product with the requirements of the current technical documentation, provided that the consumer complies with the requirements of the current operational documentation.

Head of Technical  
Control Department

Place  
for seal \_\_\_\_\_  
Personal signature

\_\_\_\_\_  
Print full name

\_\_\_\_\_  
Month, year

## 8.3. Short records on performed repair

## NON-INVASIVE ELECTROMAGNETIC THERAPY DEVICE TOR

BEMP.941523.001 № \_\_\_\_\_  
Factory number\_\_\_\_\_  
Company, dateTotal time since new \_\_\_\_\_  
Parameter that characterizes the resource or service lifeOperation time after last repair \_\_\_\_\_  
Parameter that characterizes the resource or service life

Reason for repair \_\_\_\_\_

Information on performed repair \_\_\_\_\_  
Type of repair and brief information about repair

\_\_\_\_\_

\_\_\_\_\_

## 8.4. Acceptance certificate and guarantees

## NON-INVASIVE ELECTROMAGNETIC THERAPY DEVICE TOR

BEMP.941523.001 № \_\_\_\_\_  
Factory number

accepted in accordance with the current technical documentation and recognized as fit for operation.

The repair contractor guarantees the compliance of the product with the requirements of the current technical documentation, provided that the consumer complies with the requirements of the current operational documentation.

Head of Technical  
Control Department

Place  
for seal\_\_\_\_\_  
Personal signature\_\_\_\_\_  
Print full name\_\_\_\_\_  
Month, year



9 | SPECIAL MARKS

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---



---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---



N° 01/2022



Manufacturer  
Concern GRANIT JSC  
+7(495)846 68 61  
[www.TOR-med.tech](http://www.TOR-med.tech)