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Logical your starting position 2 Tyrep between the optics This symbolizes your metal tap, 3 Turn ignition on kick the bike into live 4 Pull tyrep out off the optics 5 Your free to go to your max speed This is of course needed every time you start your bike A other thing you may consider is a whole differend thing I read that you tried serval times to get max speed. You know a 3MA is not famous when it comes to reliability Keeping the bike full throttle for a long time and not knowing what your jetting is, is walking on a thin line. Pleas make sure that you have your jetting correct, you are pushing your luck with all that top speed stuff Manually by hand turn the needle to 180 kmph you will see what the guys mean by trimming the metal back. Alternatively fit a zeel ignition if it is speed and power you are after thats the way to go. Edd Hi Edd Thank you for your response. Yes, Zeel ignition is the one that I desire for my bike, I think later I will fit em on my bike. Since now I am still a student and have quite tight budget so Zeel ignition is on the list for me now hahaha. Ive been seen it on Youtube and it sounds very convincing product. Abie Why so difficult The metal tap in the speedo must bee seen when you switch on ignition if it is not seen it goes into his safety mode. Pleas make sure that you have your jetting correct, you are pushing your luck with all that top speed stuff Hello Louis, Not a problem at all, I do understand that and your responses before that is already very helpful for me a lot, Thank you so much But me as a Newbie of TZR 3MA still looking for another information for this bike and I have seen your website either as my main references. Because in Indonesia, 250cc 2 stroke sport bike is very rare, and TZR 3MA is the rarest one. I never seen another one other than mine hahaha. So it is very difficult to share about my 3MA in

Indonesia.http://www.dean-cpa.com/files/adminpic/daewoo-vcr-dvd-recorder-manual.xml

I think I will do the one that you did of controlling the sensor manually, since in Indonesia the standard speedometer is KPH I think looking the MPH converter is a bit harder for me. Thank you Louis for the information as clear as crystal here for controlling the Limiter sensor. I will try it on my bike later and post my result here Thank you Paul and Mellorp, This information is very helpful for me. The board is available with either positive or negative output polarity; mixed version with 3 positive and 3 negative channels is also available. The channels share a common floating return, which allows ondetector grounding reducing the noise level. HV outputs are delivered through SHV connectors. Features include Imon Zoom, increasing resolution to, increasing resolution to 5nA. Functional parameters can be programmed and monitored via VMEbus. OPC Server also supported. If TRIP is set to “constant current mode”, the channel behaves like a current generator A channel in “overcurrent” works as a current generator; output voltage varies in order to keep the output current lower than the programmed value. “Overcurrent” lasting more than set value 1 to 9999 causes the channel to “trip”. Output voltage will drop to zero either at the Rampdown rate or at the fastest available rate, depending on Power Down setting; in both cases the channel is put in the OFF state.In no event will the authors, partners or contributors be held liable for any damages, claims or other liabilities direct or indirect, arising from the use of this CAEN SwFw or any derivative work. This CAEN SwFw Licence defines legal use of the CAEN SwFw, all updates, revisions, substitutions, and any copies of the CAEN SwFw made by or for you. All rights not expressly granted to you are reserved by C.A.E.N. or their respective owners. Your licence to the CAEN SwFw under this CAEN SwFw Licence continues until it is terminated by either party.

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decisions when designing and running successful experiments. By summarizing the varied approaches, stimulation parameters, and outcomes, this article should help inform future tDCS research in a variety of fields. Popularity of the technique has grown over the past decade, as exemplified in a PubMed search, returning 1,500 published articles containing the phrase "tDCS" between 2011 and 2015, in comparison to just 65 articles published between 2000 and 2005.In this traditional, unihemispheric tDCS setup, one electrode is known as the target electrode, and the other the reference electrode.

Some montages place the reference electrode extracephalically, for example on the upper arm. On the other hand, electrodes may be placed "bihemispherically" to emit dual stimulation to two parallel cortices e.g., the parietal cortices— Benwell et al., 2015 . This refers to purposefully upregulating one region of the brain, while downregulating another Lindenberg et al., 2010 . It is also now becoming common to use several smaller electrodes, rather than a singular target and reference electrode see section What Size should the Electrodes Be. It is generally assumed that a positive anodal current temporarily facilitates behaviors associated with the cortical region under the target electrode, whereas a negative cathodal current inhibits behaviors Nitsche et al., 2008 . Like transcranial magnetic stimulation TMS, active stimulation can be compared with a sham protocol see section What Is a Sham Condition. Direction of current flow differentiates anodal and cathodal stimulation by modulating the resting membrane potential of the neurons stimulated Nitsche and Paulus, 2000 . Anodal stimulation depolarizes the neurons, increasing the probability of action potentials occurring, whereas cathodal stimulation hyperpolarizes neurons, thus decreasing the likelihood of action potentials occurring Nitsche et al., 2008 . These polarityspecific effects have been demonstrated in multiple paradigms Antal et al., 2003; Priori, 2003 both during online and poststimulation offline see section What Are the Differences between Online and Offline Designs. This is partly due to the current lack of comparable research available there is great variability in protocol and setup across published studies, and many of them are often underpowered due to small sample sizes Berryhill et al., 2014; Li et al., 2015 . For researchers who are new to tDCS, designing an experiment may therefore be a timeconsuming process that involves sorting through many publications that lack consensus.

We highlight some basic principles that should be considered when designing an experiment and, in that process, allude to the methodological variability that may be hindering the creation of testable and evidencebased predictions. Whilst some of the guidelines we cover may be similar to those provided by the manufacturers of tDCS devices, we will also explore some equivocal issues in the literature that are not always accounted for by the "official" documentation. Furthermore, manufacturers do not always provide the most appropriate components with their devices, and we therefore hope that the advice provided here will allow new users to make more informed decisions about their paradigm. This has provided a valuable tool for establishing brainbehavior relationships across a variety of cognitive, motor, social, and affective domains for a review see Filmer et al., 2014 and, in healthy populations, it has been shown to temporarily modify behavior, accelerate learning, and boost task performance Coffman et al., 2014; Parasuraman and McKinley, 2014 . For example, anodal stimulation has been shown to enhance facial expression recognition Willis et al., 2015 or inhibit aggressive responses Dambacher et al., 2015; Riva et al., 2015 , whereas cathodal stimulation has been shown to foster implicit motor learning when stimulating the dorsolateral prefrontal cortex by suppressing working memory activity Zhu et al., 2015 . In practical terms, the equipment is reusable, relatively inexpensive, and easily replaced if worn or damaged. This contributes to its therapeutic potential in the clinical sciences—it is easy for researchers or patients to administer tDCS at home, and it may soon be used alongside or in replacement of drug treatments to speed recovery and improve motor and cognitive performance Brunoni et al., 2012 . Indeed, tDCS has even been successfully applied to reduce symptoms of depression Fregni et al., 2006; Nitsche et al.

, 2009 , although the field needs to expand further to support its use for this purpose. In smallscale studies it has been shown to reduce hallucinations in people with schizophrenia Agarwal et al., 2013 and to improve delays of syntax acquisition in autism spectrum disorder Schneider and Hopp, 2011 . First, the desired locations of where the electrodes will be positioned need to be ascertained further details of localization techniques are in section Localizing Electrode Placement. Prior to attaching the electrodes to the scalp, the Experimenter should ensure that there is no damaged or broken skin. If saline is being used as a conductive substance, the electrodes may be placed in sponge holding bags, saturated so that they are sufficiently damp but not dripping. However, it is becoming increasingly common to use conductive paste or EEG gel to affix the electrodes to the scalp, which may control the distribution of the current more effectively than saline. The participants hair should be parted to ensure good contact between scalp and electrode. Saline should not run down the scalp or spread over the hair. Once the electrode is placed over the target region it should be secured using a cap, rubber bands or elastic tubular netting. The reference electrode should then be secured in the same manner. Standard apparatus are illustrated in Figure 1. It is also important to check the impedance levels displayed on the stimulator to ensure that stimulation has not failed. Reliable and consistent application of tDCS requires good contact with the scalp in order to maintain conductivity through the circuit. High impedance levels are an indicator of poor conductivity and may be the result of poor electrode setup. Because impedance levels highlight whether the current can remain constant it is important to monitor these levels displayed on the stimulator throughout the experiment.

High impedance levels can be the result of inadequate parting of the hair to allow good contact with the scalp, or a lack of conductive substance between the scalp and the electrode. DaSilva et al. 2011 recommend keeping impedance levels below 5 k ohms. A stimulation failure may therefore be resolved by reapplying saline to the holding bags, or by parting the hair beneath electrodes more sufficiently. The most common method is the 1020 EEG system Klem et al., 1999 . If this is used, the participants head is firstly measured in order to accurately locate the regions of interest. This is usually done by measuring from the inion to the naison, and from the left preauricular to the right preauricular Klem et al., 1999 . Measurements can then be used in conjunction with the 1020 EEG system to locate regions of interest. Target regions may then be signposted with a washable marker. Alternatively, neuronavigation software can be used, which may be more accurate than the 1020 EEG system. However, this method does depend on the participant undergoing an MRI scan. Access to past MRI scans may be achievable, but if not, it could be costly to scan each participant before undergoing tDCS. Physiologybased placement may also be used; for example, if the motor cortex is the region of interest, TMS may firstly be used to induce motor evoked potentials MEPs to identify this region e.g., Nitsche and Paulus, 2000 . However, physiologybased placement is currently limited to few primary cortices, meaning not all electrode localization can be dependent upon this measure Woods et al., 2016 . Modeling studies may help decide upon this, since they provide computational representations, based on realistic head models, to determine how the current may flow during tDCS Bikson et al., 2012 . Modeling studies have highlighted the importance of an individuals anatomy in current injection and flow Miranda et al., 2006, 2009 as discussed in section What Parameters Should I Use.

For example, COMETS is a recently developed MatLab Toolbox Jung et al., 2013 , that aims to assist with electrode placement, by simulating current flow amongst various electrode placements. This may be useful for new researchers to explore, but it is important to note, with any modeling study, that they are purely computational representations and that head size, shape and anatomy still varies greatly across individuals. Alternatively, electroconductive gel such as EEG paste may also be used, especially for participants with thick hair. However, the use of gel will likely require participants to wash their hair after, whilst saline dries out more easily. Choosing one over the other may depend on the facilities available in ones lab, but while saline may be more common and easier for participants, it is not necessarily the best option for conductivity and secure placement with the scalp DaSilva et al., 2011 . Gels are applied to the base of the rubber electrode, so there is no need for sponge pouches. However, gel may also dry out quickly due to the temperature that the electrode emits, increasing risk of burns to the scalp Lagopoulos and Degabriele, 2008 . Note that tDCS should never be painful, although cutaneous sensations have been reported see section Adverse Effects. One research laboratory has reported that different types of gels influenced cutaneous sensations in participants, especially viscous gels, that were also difficult to apply to the base of the rubber electrode Fertonani et al., 2015 . The use of anaesthetics applied to stimulation sites has been shown to reduce uncomfortable sensations, compared to a placebo McFadden et al., 2011 . However, their use is not advisable as they may mask the sensation of any damage being caused DaSilva et al., 2011 .

It is highly important to ensure that the electrodes stay securely fixed in place during a stimulation—one study has suggested that as little as 5% movement can alter the accuracy and intensity of the current to the desired cortical areas Woods et al., 2015 . Most manufacturers provide rubber bands, and their advantage is that electrode placement is visible to the researcher. However, bands are usually narrower than the electrode and therefore may not ensure full contact with the scalp. Elastic tubular netting can also be used for securing electrodes, however, it is important to ensure that this material such as cotton does not absorb saline, as this could cause impedance errors and unwanted dispersal of the current flow across the scalp. Netting is however, easy to use and maintains uniform electrodeskin contact, by allowing the electrodes to adhere to the shape of the head Fertonani et al., 2015 . Neoprene caps are also more secure, and allow better contact with the region, although placing the electrode accurately may be slightly harder. From our own experience, neoprene caps with a chin strap are recommended. For example, if the hypothesis concerns aggression, one might focus stimulation on the prefrontal cortex Hortensius et al., 2012 . Tasks should be expected to recruit neurons in the target region, in order to observe stimulationrelated changes in behavior. Bihemispheric montages also known as “dual” stimulation may instead be used whereby the positioning of both target electrodes is important for downregulating one area cathodal current and upregulating anodal current the parallel area in the opposite hemisphere. For example, if the hypothesis concerns motor outputs, one might focus dual stimulation to both motor cortices Lindenberg et al., 2010 . It is just as important in these setups that the target regions are recruited for the task at hand.

Modeling studies have demonstrated that the distribution of the current can vary across subjects, even when the electrode montage is kept consistent, due to anatomical features such as skull thickness and composition Opitz et al., 2015 . Current direction may also be influenced by lesions that may be common in clinical samples Datta et al., 2011 . Use of neuronavigational software allows the experimenter to more accurately place electrodes above a defined cortical location, whilst taking anatomical differences across participants into account. However, researchers should be aware that no matter what method of cortical localization see section Localizing Electrode Placement is used, surrounding regions may receive stimulation, potentially causing unspecified changes to task performance. Although used infrequently, some researchers have deployed montages in which two reference electrodes are positioned on the scalp providing the same polarity, and one reference electrode is used providing a different polarity, totaling to three, rather than two electrodes see Nasseri et al., 2015, for further details on the classification of electrode montages. To ensure adequate stimulation in which most of the current reaches the target region, rather than being shunted across the scalp, the reference electrode is commonly placed opposite the target electrode. Some montages involve the electrodes being placed much closer together, however this should be avoided, as the current may travel through the cerebrospinal fluid CSF from one electrode to the other, without stimulating the cortex. This is due to the CSF being more conductive than brain tissue Moliadze et al., 2010 . Modeling research has shown that a higher percentage of current penetrates the brain if the electrodes are placed further apart Miranda et al., 2006 . A distance of at least 8 cm when using 35 cm 2 electrodes has been recommended by a modeling study Wagner et al., 2007 .

However, large distances also come at a cost, as higher stimulation intensities may be necessary Moliadze et al., 2010 . On the other hand, the current may dissipate across the scalp, meaning a decreased concentration reaches the brain region; this is known as a shunting effect. It has been suggested that if the distance between electrodes is 5 cm or less, the current would be highly susceptible to a shunting effect Rush and Driscoll, 1968 . Generally, large distances between the scalp electrodes, are expected to increase cortical modulation, allowing the current to be drawn through the cortex, rather than shunted across the scalp Bikson et al., 2010 . Additionally, smaller electrode sizes have been correlated with larger shunting effects Wagner et al., 2007 . At this location, it may be secured with hypoallergenic tape or rubber bands. One important advantage of an extracephalic electrode setup is that it helps to exclude the effect of the reference electrode on cortical modulation, focalizing the current in the active electrode greatly Nitsche and Paulus, 2011 . However, differences in extracephalic electrode placement could cause the current direction to change; for example, switching between placement on the contralateral upper arm instead of the forearm could shift the current flow to travel across parietal regions rather than frontal Bikson et al., 2010 . Nevertheless, this concern is not necessarily unique to extracephalic placement, as differing locations of cephalic electrodes and the influence of anatomical factors can also change the current direction Bikson et al., 2010; Datta et al., 2011 . Additionally, varying stimulation intensities up to the 2 mA safety threshold Iyer et al., 2005 were not investigated, nor were a variety of electrode montages, and therefore caution is advised when considering extracephalic placement.