

**Request for Quotation**      OR       **This is Purchase Order No.**

Required Delivery Date \_\_\_\_\_ Today's Date \_\_\_\_\_  
 Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_  
 State \_\_\_\_\_ Zip \_\_\_\_\_

**Machine Information:**

Manufacturer \_\_\_\_\_ Type \_\_\_\_\_  
 Model \_\_\_\_\_ Part No. \_\_\_\_\_ Line No. \_\_\_\_\_



**Container Information:**

Speed Container will run \_\_\_\_\_ Ltg/Amt. of Cont. Backlog \_\_\_\_\_  
 Container Axis/Dia. \_\_\_\_\_ Height \_\_\_\_\_  
 Container Shape     Oval     Round     Square     Rectangle     Other \_\_\_\_\_  
 Capacity \_\_\_\_\_ (Send two samples if other than round)  
 Temperature if filled \_\_\_\_\_ °      Containers running     Empty or     Full

**Timing Screw Specifications:**

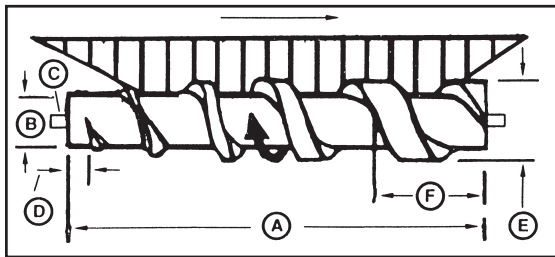
Ⓐ – Length \_\_\_\_\_      Ⓔ – Outside Diameter \_\_\_\_\_  
 Ⓑ – Root Diameter \_\_\_\_\_      Ⓕ – Discharge Pitch \_\_\_\_\_  
 Ⓒ – Shaft Diameter \_\_\_\_\_      Morrison to furnish shaft     Yes     No  
 Ⓓ – Infeed Plastic Hub Length \_\_\_\_\_      Ⓖ – Discharge Plastic Hub Length \_\_\_\_\_  
 Centerline Height of Screw to Conveyor \_\_\_\_\_  
 Adjustable     Yes     No      Inverse Taper     Yes     No

NOTES:

Ⓕ – TAPERLENGTH   
 Indicate desired materials:   
 Linen Base       UHMW Polyethylene (Hyfax 1900)  
 Delrin       Nylon  
 Other       Nylatron

RIGHT HAND ROTATION/THREAD

LEFT HAND ROTATION/THREAD



**NOTE**  
 -CHECK-DIRECTION  
 DESIRED

