



<b>Company:</b>		<b>Country:</b>		<b>RFQ:</b>	
<b>Contact:</b>				<b>Date:</b>	
<b>Phone:</b>		<b>Email:</b>			

**1. PROJECT INFORMATION:**

<i>Name:</i>		<i>Project No.:</i>	
<i>Description:</i>			

**2. PART DETAILS:**

**Total Cavities:**

<i>Name:</i>	<i>Part #</i>	<i>Material:</i>	<i># Cavs</i>
<i>Name:</i>	<i>Part #</i>	<i>Material:</i>	<i># Cavs</i>
<i>Name:</i>	<i>Part #</i>	<i>Material:</i>	<i># Cavs</i>
<i>Name:</i>	<i>Part #</i>	<i>Material:</i>	<i># Cavs</i>
<i>Name:</i>	<i>Part #</i>	<i>Material:</i>	<i># Cavs</i>

**3. CONSTRUCTION:**

<b>Type:</b> <input type="checkbox"/> Injection <input type="checkbox"/> Gas assist <input type="checkbox"/> Counter pressure <input type="checkbox"/> Structural Foam <input type="checkbox"/> Compression <input type="checkbox"/> RIM <input type="checkbox"/> Die-casting <input type="checkbox"/> Low Pressure PU <input type="checkbox"/> Other	<b>Construction:</b> <input type="checkbox"/> 2-Plate <input type="checkbox"/> 3-Plate <input type="checkbox"/> Stack <input type="checkbox"/> Inserts only <input type="checkbox"/> Runnerless <input type="checkbox"/> Reverse gate <input type="checkbox"/> Other	<b>Side Actions:</b>		
		<b>Cavity</b>		<b>Core</b>
		<input type="checkbox"/>	Mechanical	<input type="checkbox"/>
		<input type="checkbox"/>	Hydraulic	<input type="checkbox"/>
		<input type="checkbox"/>	Motor	<input type="checkbox"/>
		<input type="checkbox"/>	Other	<input type="checkbox"/>

<b>Injection:</b> <input type="checkbox"/> Cold runner <input type="checkbox"/> Hot runner # drops: <input type="checkbox"/> Custom <input type="checkbox"/> Manufactured Supplier: <input type="checkbox"/> Other	<b>Gating:</b> <input type="checkbox"/> Center sprue <input type="checkbox"/> Submarine <input type="checkbox"/> Edge/Fan <input type="checkbox"/> Pin point <input type="checkbox"/> Hot sprue <input type="checkbox"/> Valve <input type="checkbox"/> Other	<b>Ejection:</b> <input type="checkbox"/> Pins <input type="checkbox"/> Blades <input type="checkbox"/> Sleeves <input type="checkbox"/> Stripper Plate / Ring / Bar <input type="checkbox"/> Unscrewing <input type="checkbox"/> Air <input type="checkbox"/> Other	<b>Finishing:</b>		
			<b>Cavity</b>		<b>Core</b>
			<input type="checkbox"/>	SPE-SPI	<input type="checkbox"/>
			<input type="checkbox"/>	Texture	<input type="checkbox"/>
			<input type="checkbox"/>	Nickel	<input type="checkbox"/>
				Chrome	<input type="checkbox"/>
				Other	<input type="checkbox"/>

**4. MATERIALS:**

	ALU	C1040	P20	HHP20	H13	SS	Other	Hardness (RC)	Notes
Mold base	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Core	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Cavity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Inserts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Slides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Lifters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			

**5. COMMENTS:**