

# Request For Quote

## Customer Information

Company Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Fax \_\_\_\_\_

Contact \_\_\_\_\_  
 E-mail Address \_\_\_\_\_

## Hot Runner System Information

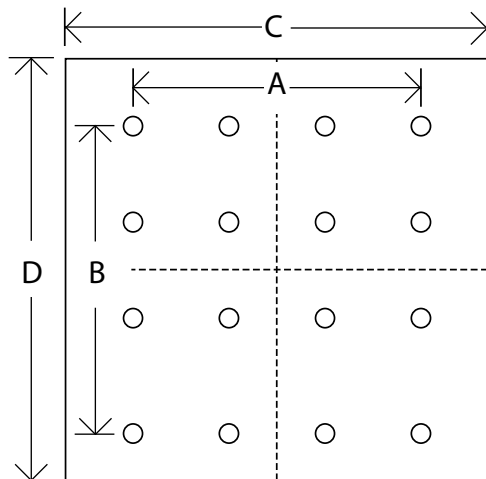
Part Description \_\_\_\_\_  
 Number of Cavities \_\_\_\_\_  
 Color Changes required? Yes  No   
 Resin Type   
 Other Resin \_\_\_\_\_  
 Ultra Nozzle Type

Part Weight \_\_\_\_\_  
 Number of Drops per face \_\_\_\_\_  
 Insulator Board? Yes  No   
 System Type   
 If Stack mold, center section support type?   
 Repeat Project Number \_\_\_\_\_

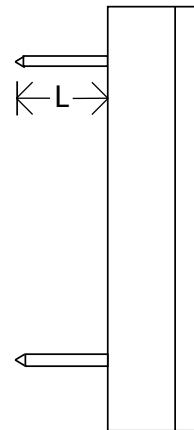
Other Info.

### Layout - please specify units

Horizontal Drop Spacing (A) \_\_\_\_\_  
 Vertical Drop Spacing (B) \_\_\_\_\_  
 Plate Width (C) \_\_\_\_\_ (N/A if Manifold System)  
 Plate Length (D) \_\_\_\_\_ (N/A if Manifold System)  
 L-Dimension (Nozzle Length) (L) \_\_\_\_\_  
 Drop Layout (ie.16 drop - 2x8 or 4x4) \_\_\_\_\_



16 Drop Example - 4 x 4 layout



## Temperature Controller Information (if requesting)

Number of Zones: \_\_\_\_\_  
 Are all Zones 15 amps or less? Yes  No   
 Card Type   
 Cables

Power Input   
 Enclosure Type   
 Interface

If Custom, list specifications \_\_\_\_\_

Please visit [www.hotrunners.com](http://www.hotrunners.com) for detailed information

Date: \_\_\_\_\_