



Screw Tip Assembly Quotation Request

To request a quote, complete this form and save. Open an email and attach the saved form. Email to: Sales@ServicesForPlastics.com

Contact Information:

Company: _____

Account Number (If known): _____

Name: _____

Phone: _____

Job Title: _____

Email: _____

Address: _____

Type of Business: _____

City: _____ State: _____

Zip Code: _____ Country: _____

How you found us: _____

Quotation Information:

Machine Make: _____

Ounce Capacity: _____

Model Number: _____

Resin Type: _____

Injection Unit: _____

Tip Nose Angle: _____

Number of Flutes: _____

Overall Length: _____

Flute Style: Restricted Flow

Diameter: _____

Free Flow Full Flute

Thread Size: _____

OEM Design

Thread Pitch: _____

Design:

Type:

Number of Pieces:

Construction Material:

Ball Check Valve

Sliding Ring Valve (Rotating)

Injection

3 Piece

H13

CPM M4

Poppet Valve

Thermoset

4 Piece

D2

CPM 420V

Smear Tip

Sliding Ring Valve (Non-rotating)

CPM 9V

Other Information: