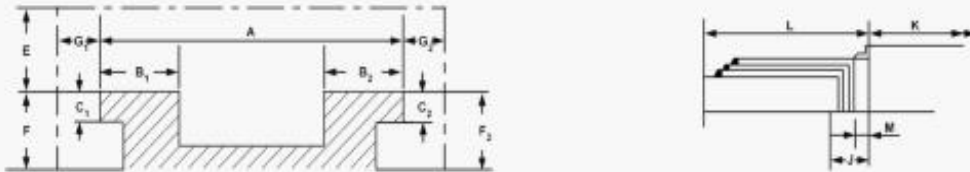




Inquiry Sheet for Steel Way Cover

Quantity: _____ Delivery Date: _____

Company Name: _____ Contact: _____
 Address: _____
 Phone: _____ FAX: _____
 Customer Drawing Reference: _____
 Application / Machine: _____



Position of Cover on Machine

- horizontal
- crossrail
- vertical column
- incline slideway

Required Design



Machine Details

- A width over slideways
- B₁ width of L.H. way
- B₂ width of R.H. way
- C₁ depth of L.H. way
- C₂ depth of R.H. way
- E height above slideways
- F₁ depth below L.H. way
- F₂ depth below R.H. way
- G₁ width to L.H. of slideway
- G₂ width to R.H. of slideway
- J end of saddle to end of ways

Cover Details

- K stroke required including over-run
- L minimum closed length
- L maximum open length (L_{min} + K)
- M distance to clear fittings
- number of sections _____
- brass, polyurethane or roller guides _____
- special material requirements _____
- access doors _____
- extension brackets _____
- walk-on _____
- other _____

Operating Conditions

- | | | | | |
|----------------------------------|--|-----------------------------------|--|---|
| <input type="checkbox"/> indoor | <input type="checkbox"/> dry | <input type="checkbox"/> abrasive | <input type="checkbox"/> welding sparks | <input type="checkbox"/> oil |
| <input type="checkbox"/> outdoor | <input type="checkbox"/> coolant, type _____ | <input type="checkbox"/> magnetic | <input type="checkbox"/> ash / dust / sand | <input type="checkbox"/> chips / swarfs |
| <input type="checkbox"/> wet | <input type="checkbox"/> corrosive | <input type="checkbox"/> heat | <input type="checkbox"/> salt water | |

Working Temperature: min _____ max _____ average _____
 Travel Speeds: min _____ max _____ average _____
 Pressure Internal / External: min _____ max _____ average _____
 Frequency of Operation: cycles per minute: _____ cycles per day / year: _____ / _____

Seal & Cylinder Source, Inc.
 44250 North Avenue
 Clinton Township, MI 48045
 Phone: 586-791-9001 Fax: 586-791-9033