



Request for Hot Runner Quote Form

Date _____
 Company _____
 Contact _____
 Street _____
 City/State/ZIP _____
 Phone _____
 Fax _____
 Email _____

Technical Data

Part name	_____		
Type of material	_____		
%Glass	<input type="checkbox"/> Flame retardant	<input type="checkbox"/> Heat stabilized	
Material supplier	_____		
Manufacturer ID	_____		

1. Hot Runner Type

Hot runner nozzles	<input type="checkbox"/> PR Series	<input type="checkbox"/> SI Series
Manifold	<input type="checkbox"/> Flexible	<input type="checkbox"/> Pressed in

2. Hot Runner Nozzles

Number of nozzles	_____
Type of nozzle with tip designation	_____
Length of nozzles (L-dim) in mm	_____
Number of cavities	_____

3. Part

Part weight per each nozzles	<input type="checkbox"/> g <input type="checkbox"/> oz
Injection time	_____ sec. (estimated)
Type of gating	<input type="checkbox"/> vertical <input type="checkbox"/> side gate
	<input type="checkbox"/> valve gate
	<input type="checkbox"/> sub gate
	<input type="checkbox"/> direct
<input type="checkbox"/> Material color change	
Max. flow length	_____ mm
Wall thickness	_____ mm

Part design attached

Quote to be submitted by: _____

V-Tek sales department Sales representative

Customer Comments:

4. Manifold

<input type="checkbox"/> Offset	<input type="checkbox"/> Straight manifold	<input type="checkbox"/> Cross manifold
<input type="checkbox"/> H – manifold	<input type="checkbox"/> Special manifold	
<input type="checkbox"/> Balanced	<input type="checkbox"/> Unbalanced	
Nozzle pitch	Row pitch	
<input type="checkbox"/> Nozzle pitch sketch		
<input type="checkbox"/> Standard steel	<input type="checkbox"/> Stainless steel	
Number of thermocouples per manifold		

<input type="checkbox"/> New	<input type="checkbox"/> Retrofit	
Mold size (L x W x H)		
230 V hot manifold build up with <input type="checkbox"/> Enclosure <input type="checkbox"/> Rail		
Machine nozzle radius	<input type="checkbox"/> R ½ “ <input type="checkbox"/> R ¾ “	
	<input type="checkbox"/> Straight	
	<input type="checkbox"/> R =	
Gate bushing	<input type="checkbox"/> Without	<input type="checkbox"/> Standard <input type="checkbox"/> Extended
<input type="checkbox"/> Completed hot half	See hot half worksheet	

5. Controllers

<input type="checkbox"/> Existing controller	Operating voltage:
Make & Model	_____
<input type="checkbox"/> Quote new controller	Operating voltage:

Preliminary quote Firm quote

Order Delivery requested by: _____