



DME / Milacron
29111 Stephenson Highway
Madison Heights, MI. 48071-2383

Applications Engineering
QUOTE REQUEST FORM

Email to:
DMEUS_AE_Quote@milacron.com



Tech Service Approval, Final Drawings and In-House Due Date Required for Firm Quote - QUOTE TYPE Preliminary Firm

Customer's In-House Date Requirement

Date			Sales Rep	
Company			Contact	
Address			Phone	
Address			Fax	
City			E-Mail	
State	Zip	Acct#	End User	

Molding Material			Melt Temp	deg.
Manufacturer			Range	(min) (max)
Filler	<input type="checkbox"/> None	<input type="checkbox"/> Glass	<input type="checkbox"/> Other	Percent %
Flame Retardant	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Melt Flow Index	
Color Changes	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Mold Temp	deg.

New Mold	Retrofit	DME Mold Base to be Quoted
Mold Base Size		Mold Base Drawings Supplied

Gating Into	<input type="checkbox"/> Part	<input type="checkbox"/> Dimple	<input type="checkbox"/> Runner
Gate Style	<input type="checkbox"/> Sprue	<input type="checkbox"/> Ext Sprue	<input type="checkbox"/> Tip / Point <input type="checkbox"/> WR <input type="checkbox"/> Other
Number of Drops	Number of Cavities		

Part Name			Part Number	Job #
Part Drawing Supplied	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Sample Supplied	<input type="checkbox"/> Yes <input type="checkbox"/> No
Wall Thickness of Part			CAD Data Supplied	<input type="checkbox"/> Yes <input type="checkbox"/> No
Part Weight	<input type="checkbox"/> Grams	<input type="checkbox"/> Ounces	Total Shot Weight	<input type="checkbox"/> Grams <input type="checkbox"/> Ounces
Runner Weight	<input type="checkbox"/> Grams	<input type="checkbox"/> Ounces		

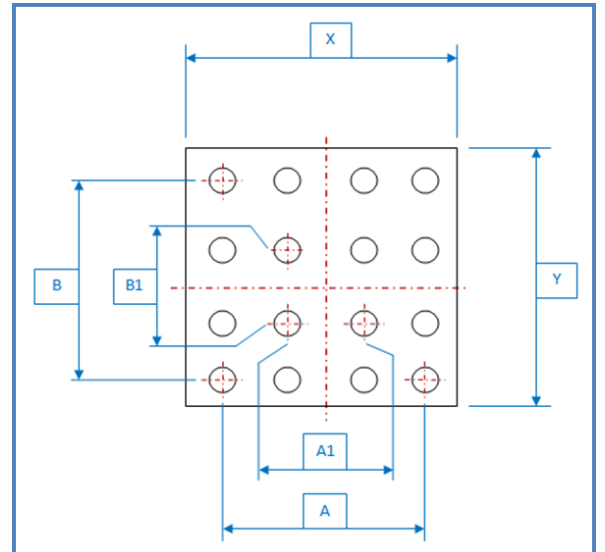
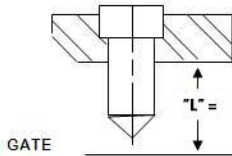
Type of Quote Requested M&C (system) Hot Half - Plate Steel #2 (standard) 420SS

Drop Spacing	A=
	A1=

Drop Spacing	B=
	B1=

Plate Width	X=
Plate Length	Y=
Molding Elevation	L=

# of Columns	
# of Rows	



NOTES:

Completed By:	Date
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Date	Sales Rep
Company	Contact
Address	Phone
Address	Fax
City	E-Mail
State	End User

Options Required		
<input type="checkbox"/> Leader Pins in Nozzle Plate	<input type="checkbox"/> Recessed Connectors	<input type="checkbox"/> Special Terminal Box
<input type="checkbox"/> Mounting Bolts from Parting Line	<input type="checkbox"/> Flush Mounted Connectors	Describe:
<input type="checkbox"/> Mounting Bolts from Back Side	<input type="checkbox"/> Manifold Extension Nozzle - <input type="checkbox"/> None	<input type="checkbox"/> Special Connectors
<input type="checkbox"/> Cavity Mounting Screws	<input type="checkbox"/> Mold Flow Analysis	Describe:

SYSTEM TYPE (required)	QUOTE STYLE (required)
<input type="checkbox"/> Stellar (Z-Dim) Max 135mm [5.314 in.] / Min 27mm [1.063 in.]	<input type="checkbox"/> Hot-Half - Plate Material <input type="checkbox"/> #2 <input type="checkbox"/> #7 (Stainless Steel) <input type="checkbox"/> Other <input type="checkbox"/> Manifold & Components <input type="checkbox"/> Manifold Only
<input type="checkbox"/> HOT ONE Nozzle Series (Standard) <input type="checkbox"/> 250 <input type="checkbox"/> 375 <input type="checkbox"/> 625 Nozzle Series (High Performance) <input type="checkbox"/> 250 <input type="checkbox"/> 375 <input type="checkbox"/> 625 Nozzle Heaters <input type="checkbox"/> Front-load (default) <input type="checkbox"/> Rear-load	<input type="checkbox"/> Hot Half Plate Material <input type="checkbox"/> #2 <input type="checkbox"/> #7 (Stainless Steel) <input type="checkbox"/> Other <input type="checkbox"/> Manifold & Components <input type="checkbox"/> Manifold Only Manifold Material -

Notes:

Sketch

Select components verified to fit by Sales Tech Rep Applications Engineer

Completed by:	Date
Tech Service Approval	Date