ROLL-UP COVERS QUOTE REQUEST



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COMPANY (complete address) Title _____ E-mail ____ Phone ______ Fax _____ Date ___/__/___ 2 APPLICATION & ROLL-UP MATERIAL Machine Make _____ Year Machine Model Length of Machine Travel Apron Type ☐ Coated Fabric ☐ Extruded Aluminum (○ Aluflex ○ GS20 ○ AGS mini ○ AGS I ○ AGS II ○ AGS III) ☐ Stainless Steel ☐ Series 53 Metal Clad (○ 53-1 ST/ST ○ 53-1 ST/MS ○ 53-1 MS/MS ○ 53-2 AL/ST ○ 53-4 ST/ST ○ 53-4 ST/MS) Quantity ___ 6 DIMENSIONS & MOUNTING A Maximum width allowable with mounting brackets or cannister _____ **B** Cover Width C Fully extended cover length _____ **Include mounting brackets** ☐ Yes ☐ No Open reel Cannister Mounting Type (End 1) ☐ Normal ☐ Straight ☐ Angle ☐ Hinge DO YOU NEED TECHNICAL HELP? Do you have a question or a unique configuration? Our customer service department is eager to help you. Tell us about your needs and let the most experienced engineers and technical support people in the industry create the perfect solution.