

RUBBER DISK BELLOWS QUOTE REQUEST



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Please complete this form and email or fax to your desired location
 info@hennig-inc.com [Find Your Regional Contact](#)

1 COMPANY (complete address)

Name _____
 Title _____
 E-mail _____
 Phone _____ Fax _____ Date ____/____/____

2 APPLICATION

Quantity _____
 Working Position Horizontal Vertical
 Use of Bellows Outside Inside
 Temperature Range _____
 Work Cycles / min _____
 Max Speed (m/min) _____
 Working Hours / Day _____
 Sliding Bearings Yes (Quantity _____) No
 Air vents Yes No

Exposed To	Inside	Outside	Permanently	Sporadically
<input type="checkbox"/> Water	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Dust	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Oil/Grease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Acid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Leaches	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3 DIMENSIONS

d _____ \varnothing Di _____
 L (max) _____ \varnothing DA _____
 L (min) _____ \varnothing DA1 _____
 H1 _____ \varnothing D1 _____
 H2 _____ \varnothing D2 _____

4 MOUNTING OPTIONS

