



Custom Quality Manufacturing, Inc.

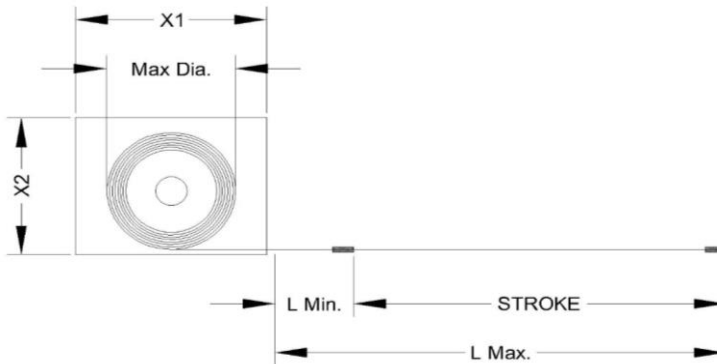
5015 Tampa West Blvd. - Tampa, FL 33634 - Phone: (813) 290-0805 - Fax: (813) 290-0607
 Toll Free - USA/Canada/Mexico: Phone: 1-800-932-0140 - Fax: 1-800-931-0140
 eMail: sales@cqm-inc.com Web: www.cqm-inc.com

ROLLER COVER QUOTE REQUEST

Company	<input type="text"/>	Contact	<input type="text"/>
City, State	<input type="text"/>	Email	<input type="text"/>
Phone	<input type="text"/>	Fax	<input type="text"/>

COVER INFORMATION

L Max	<input type="text"/>	Width	<input type="text"/>	X1	<input type="text"/>
L Min	<input type="text"/>	Max Dia.	<input type="text"/>	X2	<input type="text"/>
Stroke	<input type="text"/>	Max Speed	<input type="text"/>	Quantity	<input type="text"/>

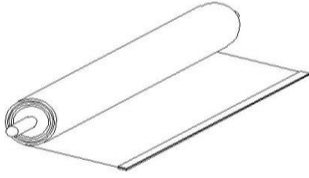


ENVIRONMENTAL CONDITIONS/PROTECTION

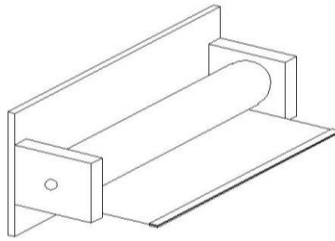
Machining	Light	Medium	Heavy
<input type="checkbox"/> Hot Chips	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Cutting Oils/Coolants/Lubricants	<input type="text"/>	<input type="text"/>	<input type="text"/>
Specify Type:	<input type="text"/>		
<input type="checkbox"/> Particles	<input type="text"/>	<input type="text"/>	<input type="text"/>
Specify Type:	<input type="text"/>		
<input type="checkbox"/> Water/Moisture	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Grinding and Swarf	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Weld Platter	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Electrostatic Requirements	<input type="text"/>		
<input type="checkbox"/> Clean Room	<input type="checkbox"/> Dry	<input type="checkbox"/> Safety/Dust Cover	<input type="checkbox"/> FDA
<input type="checkbox"/> Chemicals	<input type="checkbox"/> 0-30%	<input type="checkbox"/> 35-55%	<input type="checkbox"/> 55-100%
Temperature Range:	<input type="text"/> F°	<input type="text"/> C°	
Ambient	<input type="text"/> Minimum	<input type="text"/> Maximum	<input type="text"/>
Cycles per Day	<input type="text"/>	Axis:	<input type="text"/>

ROLLER COVER QUOTE REQUEST

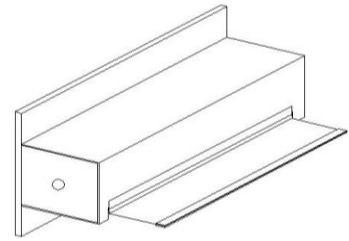
ROLLER STYLE



A Plain Roller Cover

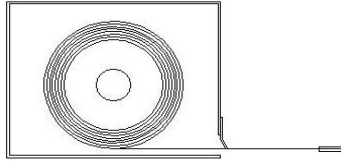


B With Ends Bearings

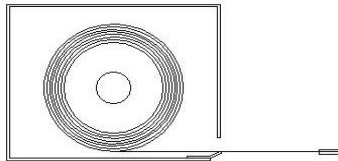


C With Housing

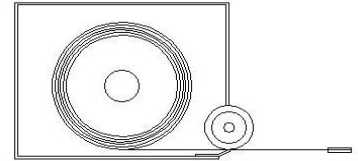
HOUSING STYLE



S Wiper Over Cover

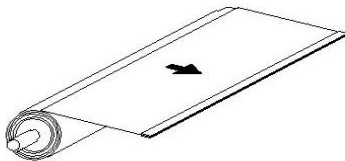


B Wiper Under Cover

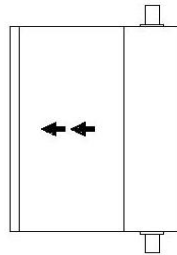


C Wiper Under Cover With Pulley

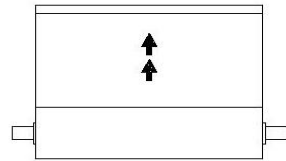
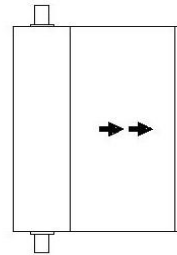
MOUNTING POSITION



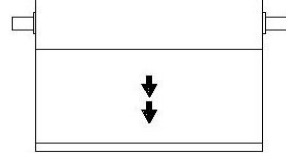
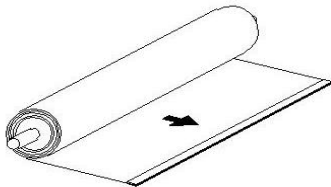
HO Horizontal



FO Front

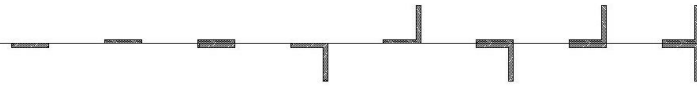
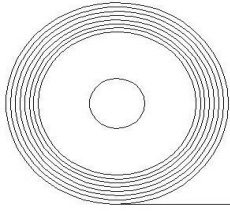


VO Vertical



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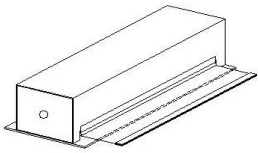
COVER ATTACHMENT



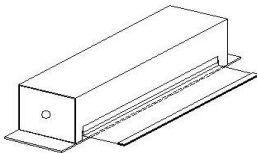
a b c d e f g h

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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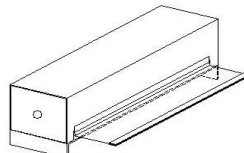
CONNECTION PLATE



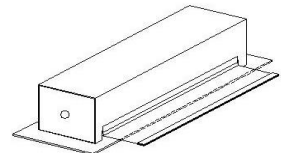
F1



F2

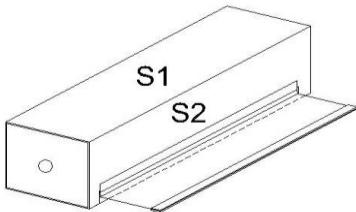


F3



F4

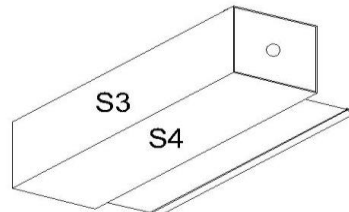
CONNECTION PLATE POSITION



S1

S2

S2



S3

S4

S3

S4