

RFQ INFORMATION

Company _____
Address: _____

Date Received: _____

Contact Name: _____ Phone: _____ Fax: _____

Email Address: _____

Part Name or Number _____

Is part new or existing? _____ If existing, are samples available? _____

Are prints available? _____ Number of cavities in mold: _____

Estimated annual usage _____ pcs. Estimated production releases: _____ pcs.

Is assembly involved? _____ Secondary operations? _____

Are there inserts or purchased parts? _____

Resin Family to be molded in _____

Agreed % of regrind that can be used _____%

Resin Specifications: _____

Colorant required? _____ If yes, what color _____

Colorant Specifications: _____ Surface Finish? _____

Tooling Requirements _____

Box choice ___x___x___ Quantity that can be packed in box _____ pcs.

FOB point: _____

Testing Requirements of part: _____

Life of project: _____ Target Price: _____ Release Date: _____

Additional Comments:

