



DME  
42827 Irwin Drive  
Harrison Twp., MI. 48045

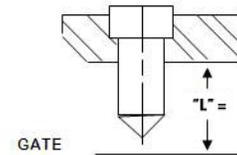
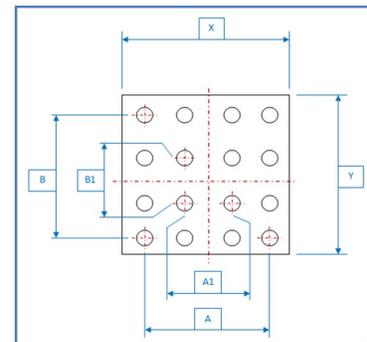
Applications Engineering  
QUOTE REQUEST FORM  
Email to: [mailto: DME\\_Tech\\_Service@dme.net](mailto:DME_Tech_Service@dme.net)

**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	<input type="checkbox"/> 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	StellarONE (Fixed Point/Sprue Tip only) / Hot One		StellarONE (Valve Gate)		
	<input type="checkbox"/> Sprue	<input type="checkbox"/> Ext Sprue	<input type="checkbox"/> Tip/Point	<input type="checkbox"/> WR	<input type="checkbox"/> VG-Bodiless <input type="checkbox"/> VG-Full Body <input type="checkbox"/> VG-Full Body Ext'd
	<input type="checkbox"/> Other		<input type="checkbox"/> VG-Sprue		
Number of Drops	Number of Cavities		Control: <input type="checkbox"/> Pneumatic <input type="checkbox"/> Hydraulic <b>*** 700 PSI MAX***</b>		
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	<input type="checkbox"/> M&C (system) <input type="checkbox"/> Hot Half - Plate Steel		<input type="checkbox"/> #2 (standard)	<input type="checkbox"/> 420SS	<input type="checkbox"/> iControl

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	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"/> StellarONE Series <input type="checkbox"/> 04 <input type="checkbox"/> 06 <input type="checkbox"/> 08 <input type="checkbox"/> 10 <input type="checkbox"/> 12 <input type="checkbox"/> 16 VG Actuation <input type="checkbox"/> Sequential <input type="checkbox"/> Standard	<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                      Manifold Material:
<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	