SPECIFICATION

Contact INFO:

Company Name: Tel:

Contact: E-mail:

Timeline:

Budget ☐ Approved ☐ Date requested: _____

Date in production: _____

Factory:

1. Average Temperature: _____℃
2. Air Conditioning: ☐ Yes ☐ No
3. Press Use Frequency Per Day: ☐ 8 Hours ☐ 16 Hours
   ☐ 24 Hours ☐ Others:_____Hours
4. Manufacturing Product: _____
5. Material: ☐ High Tension Sheet Metal ☐ General Sheet Metal ☐ Tubular Sheet Metal
   □ Thick Sheet Metal ☐ Others: _____
   Thickness:_____mm
   Comments:

Press:

6. Feed Type: ☐ Automatic ☐ Manual
7. Press Capacity: _____t
8. Daylight (Max.) _____mm
9. Slide Stroke: _____mm
10. Bolster Type: ☐ Fixed ☐ Moving (Number of Bolsters:_____)
    ☐ Linear Type ☐ T Type
    ☐ Forward ☐ Back ☐ Both ☐ Forward ☐ Back ☐ Both
    ☐ Left ☐ Right ☐ Both ☐ Left ☐ Right ☐ Both
    □ Others: _____
11. Slide / Bolster Area
    (L>R x F>B): _____mm x_____mm

Speed:

12. Fast Down Speed: ☐ 300mm/s ☐ 400mm/s ☐ 500mm/s
☐ 600mm/s ☐ Others:_____mm/s

13. Pressing Speed (@Max. Capacity): ☐ 20mm/s ☐ 30mm/s ☐ 40mm/s
☐ 50mm/s ☐ 100m /s ☐ Others:_____mm/s

14. Fast Up Speed: ☐ 300mm/s ☐ 400mm/s
☐ 600mm/s ☐ 700mm/s
☐ Others:____mm/s

Option:

15. ☐ Die Cushion:
15a. Capacity: _____t
15b. Stroke: _____mm
15c. Area
(L>R x F>B): _____mm x_____mm
15d. Speed: ☐ 80mm/s ☐ 100mm/s ☐ Others:_____mm/s

16. ☐ Top Knock out:
16a. Capacity: _____t
16b. Stroke: _____mm
16c. No. of Pin(s): 16d. Speed: _____pc(s)

17. ☐ Bottom Knock out: 17a. Capacity: _____mm/s
_____t
17b. Stroke: _____mm
17c. No. of Pin(s): 17d. Speed: _____pc(s)
_____mm/s

18. PLC: ☐ Mitsubishi ☐ Allen Bradley
□ Siemens ☐ Others: _____

19. Others: _____