

Company Name: Date:

Street Address:

City State Zip Code

Engineer Name: Title:

Email: Phone:

## **General Information**

Part Number: Engine Number:

Part Type: Blade Vane Other

## **Part Volumes**

Initial Startup Annual Production Volume: Volume:

## **Casting Information**

Alloy Casting Cycle Approx. Preheat Temperature:

Alumina Rods: Quartz Rods: Equiax DS Single Crystal Approx Pour

Yes No Yes No Other Approx. Pour Temperature:

## **Program/Tooling Information**

New Program
Yes No

Prints Available
Yes No

Models Available
Yes No

Inspection Criteria
Visual/Dimension
Requirements:

Gaging/ Blue Light Requirements:

Tooling Provided:
Yes No

Core-Tech to Quote Tooling Provided:
Yes No

Support Tooling Provided:
Yes No

Core-Tech to Quote Support Tooling:
Yes No

Additional Relevant Information:

Please return completed form to sales@core-tech-inc.com Call us at 440-946-8324 for more information. Thank you!