

Custom Quote Form

Distributor: Date:			
Client:			
Address:			
City:	State:	Z	ip:
Telephone: Fax:	e-r	nail:	
Contact:	Title:		ext:
Client's budget:	Date quote needed:		
Description of Facility:			
Type of manufacturing, processing, or repa	air work done at this loca	tion:	
Cleaning Requirements:			
Describe the parts needing to be cleaned:_			
Parts material composition:			
-			
Maximum size of part (inches): L:	vv	П	01
Diameter:	Thickness	ss:	
Maximum weight of part or batch (lbs.):			
Average number of parts per batch:			
Number of batches per day:	Time allowed	per batch:	

Cu	rrent Cleaning Process:
	Manual with solvents, types:
	Manual with water based chemistry, types:
	Agitation with solvents, types:
	Agitation with water based chemistry, types:
	Spray wash cabinet with water based chemistry, types:
	Vapor degreaser, solvent used:
	Ultrasonics, brand: model:
	ultrasonic power (watts): frequency (kHz):
Ta	nk Size/Configuration:
Ta	nk size (inches): L W D (customer requested)
	Single tank
	Multiple tanks, number:
	Console Configuration: $W = Wash$ $R = Rinse$ $D = Dry$ $F = Filtered$
Fre	equency (kHz):
Ulı	crasonic Power per tank (watts):
	Filtration (micron size):
	Oil Skimming: Weir with spray Stainless belt skimmer over the edge Both
	Automation (describe):

Baskets: Type Qty
Electrical: 110V 208V,1Ø 208V,3Ø 240V,1Ø 240V,3Ø Other
Special Requirements:

Fax completed form to Pro Ultrasonics @ (828) 584-9005

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