

BALL NOSE FORM

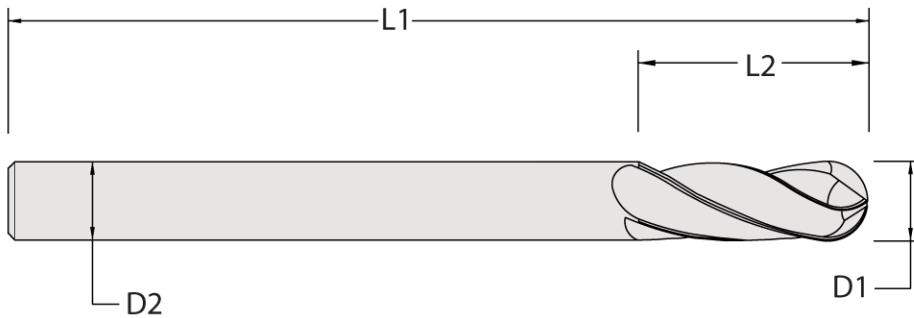
REQUEST FOR QUOTATION



PRECISION CUTTING TOOLS
Member IMC Group

5572 Fresca Drive, La Palma, CA 90623

Please complete the information below and submit your **BALL NOSE FORM**
If you have any questions contact one of our sales representatives at (562) 921 - 7898.



| Tolerances per Customer | | | |
|-------------------------|------------------|--|--------|
| D1 | Diameter : | | + - |
| D2 | Shank Diameter : | | + - |
| L2 | Length of Cut : | | + - |
| L1 | Overall Length : | | + - |
| # of Flutes : | | | |

Material (Please Select)

- Carbide HSS Cobalt

Spiral (Please Select)

- RHS LHS

Helix Angle: _____

Coating (Please Select)

- Vulcan® Exxtral Carbon® Varianta Supral® Zirco Sistral TiN

Coolant Fed (Please Select)

- YES NO

Quantity: _____ Due Date: _____ Application: _____

Additional Information : _____

Company

Contact

Street

City, State, ZIP

Telephone

Fax

email

Customer Number

Signature

Date