



2805 ENGINEERS RD  
 BELLE CHASSE, LA 70037  
 (504) 394-4010  
 Fax (504) 393-9625

**REQUEST FOR PRICE QUOTATION  
 AND  
 CONTRACT ORDER FORM**

**24 HOUR  
 SERVICE**  
 CALL TOLL FREE  
**1-800-221-8577**

Quotation # \_\_\_\_\_ Standard \$ \_\_\_\_\_ Standard Delivery \_\_\_\_\_  
 Overtime \$ \_\_\_\_\_ O.T. (Rush) Delivery \_\_\_\_\_  
 Quoted By: \_\_\_\_\_ Date: \_\_\_\_\_ **(Quotation Valid for 30 days)**  
 Customer Acceptance: Purchase Order # \_\_\_\_\_ Date: \_\_\_\_\_  
 Customer Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Is this a revision of an earlier contract? - YES / NO ? If "yes", revision date: \_\_\_\_\_

**Shipping Method:** Truck \_\_\_\_\_ Air Freight \_\_\_\_\_ Expediting \_\_\_\_\_ Regular \_\_\_\_\_ Approved By \_\_\_\_\_

CUSTOMER \_\_\_\_\_ MFG \_\_\_\_\_ H.P.K.W. \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ RPM \_\_\_\_\_ FRAME \_\_\_\_\_  
 CITY \_\_\_\_\_ VOLTS \_\_\_\_\_ AMPS \_\_\_\_\_  
 STATE \_\_\_\_\_ ZIP \_\_\_\_\_ MODEL \_\_\_\_\_ TYPE \_\_\_\_\_  
 PHASE \_\_\_\_\_ HZ \_\_\_\_\_ TEMP RISE \_\_\_\_\_  
 S N \_\_\_\_\_

**WINDING DATA**

NO SLOTS \_\_\_\_\_  
 COIL SPAN I & \_\_\_\_\_  
 NO. CIRCUITS & CONN \_\_\_\_\_  
 \_\_\_\_\_ WYE OR DELTA \_\_\_\_\_  
 JUMPER CONN 1-4  or 1-7   
 WIRE SIZE \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_  
 \_\_\_\_\_ X \_\_\_\_\_ X \_\_\_\_\_  
 WIRES IN HAND \_\_\_\_\_  
 ENAMEL  **{** STRAND INSULATION  
 GLASS   
 MICA   
 NO. TURNS \_\_\_\_\_  
 GROUPING \_\_\_\_\_

**CORE DIMENSIONS**

1. CORE BORE DIA \_\_\_\_\_  
 2. CORE LENGTH \_\_\_\_\_  
 3. FINGER WIDTH \_\_\_\_\_  
 4. TOTAL SLOT DEPTH \_\_\_\_\_  
 5. DEPTH UNDER WEDGE \_\_\_\_\_  
 6. SLOT WIDTH (dec. dim.) \_\_\_\_\_

**COIL DIMENSIONS**

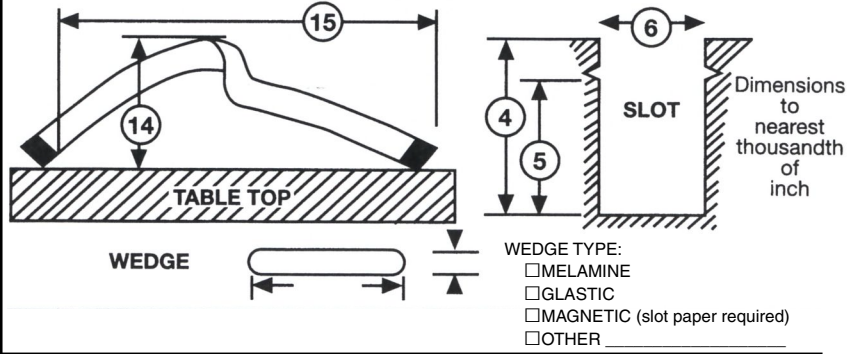
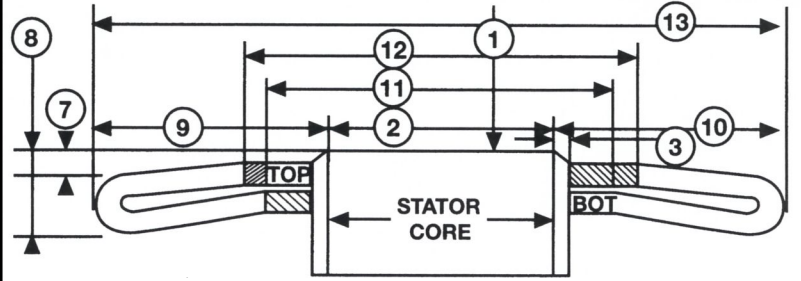
7. SMALL KNUCKLE DROP \_\_\_\_\_  
 8. LARGE KNUCKLE DROP \_\_\_\_\_  
 9. COIL EXT. LEAD END \_\_\_\_\_  
 10. COIL EXT. OPP. END \_\_\_\_\_  
 11. BOT STRGT. LGTH \_\_\_\_\_  
 12. TOP STRGT. LGTH \_\_\_\_\_  
 13. TOTAL COIL LGTH \_\_\_\_\_  
 14. TABLE TOP HEIGHT \_\_\_\_\_  
 15. CHORD DIMENSION \_\_\_\_\_

**TYPE INSULATION REQ'D**

"F" VARNISH TREATED. . . . .   
 "H" VARNISH TREATED. . . . .   
 V.P.I. UNTREATED . . . . .   
 HERMETIC UNTREATED . . . . .   
 OMNI-SEAL RESIN COATED . . . . .

**SPECIAL FEATURES:**

	YES	NO
DATA CHANGE . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
TURN INSULATION. . . . .	<input type="checkbox"/>	<input type="checkbox"/>
SKewed SLOT . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
TERRACE WOUND . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
KNUCKLE DROP CRITICAL. . . . .	<input type="checkbox"/>	<input type="checkbox"/>
END BELLS CLOSE . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
SUPPORT RINGS PRESENT? . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
IF SO, DISTANCE FROM CORE _____ DIA. OF RING		
TIN LEADS . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
TAPED LEADS . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
CORONA SHIELD . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
SLOT PAPER IN USE. . . . .	<input type="checkbox"/>	<input type="checkbox"/>
R.T.D.'S IN USE (OHMS _____) (QTY. _____)	<input type="checkbox"/>	<input type="checkbox"/>
WEDGES (SIZE _____) (QTY. _____)		
FINISHED UNIT PROCESSED IN _____ RESIN/VARNISH		



**LEAD LOCATION (check one)**

