PROTECTIVE COVERS

DYNATECT ®
DYNAMIC EQUIPMENT PROTECTION

FLAT/STRIP-TYPE BELLOWS | QUOTE REQUEST FORM

Date _____   Address _____

Company Name _____   City _____ State/Prov. _____

Contact _____   Country _____ Zip/Postal Code _____

Quantity _____   Telephone _____ Fax _____

Email _____

Please use this form to request a quote for a custom flat/strip-type bellows. Fill in as many specification values as possible. If measurement units are different than the options shown, please specify unit of measure.

1. Application Information

New Design or Replacement Application: ☐ New Design   ☐ Replacement

Cover Orientation: ☐ Horizontal   ☐ Vertical   ☐ Cross Rail

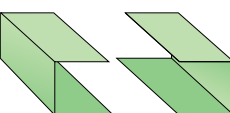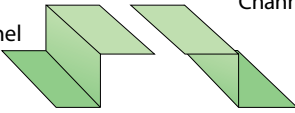Construction Preference: ☐ Dynatect Recommendation   ☐ Heat-Sealed   ☐ Sewn   ☐ Sewn/Folded   ☐ Vulca-Seal®

2. Operation Information

Continuous (ambient) Temperature: _____ ☐ °F ☐ °C   Intermittent Temperature Range: Min. _____ Max. _____ ☐ °F ☐ °C

Frequency of Exposure: _____   Distance from Heat Source (if applicable)*: _____

Maximum Travel Speed*: _____   Movements/Day _____   Acceleration*: _____

*Please indicate unit of measurement for each value.

3. Environmental Information

Heat Exposure: ☐ Weld Spatter   ☐ Hot Chips/Swarf   ☐ High Ambient Temperature (specify in "Operation Information" above)

Abrasion Exposure: ☐ Metal Chips/Swarf   ☐ Wood Chips/Shavings   ☐ Light Particles/Dust   ☐ Other _____

Chemical or Liquid Exposure: ☐ Water ☐ Moisture ☐ Salt or Sea Spray ☐ Petroleum/Hydrocarbons ☐ Oils (non-petroleum)
☐ Hydraulic Fluid (petroleum-based) ☐ Hydraulic Fluid (phosphate ester-based)
☐ Acid ☐ Coolant ☐ Cutting Fluid ☐ Other (specify) _____

Contaminant Exposure Level: ☐ Minimal ☐ Occasional ☐ Heavy

Miscellaneous: ☐ UV/Ozone ☐ Outdoors ☐ Food-Grade/FDA ☐ Laser Beam ☐ Clean Room ☐ Other (specify) _____

Regulatory Compliance: Standard _____ ☐ Bellows must be fire retardant (list standard to the left)

Application Notes: _____

4. Cover Support Channels   (Channels can be included upon request. It is recommended to provide a drawing.)

Will the cover operate within an existing channel? ☐ Yes ☐ No*   *Would you like us to provide channel supports? ☐ Yes ☐ No

Support Type: Channel Material: ☐ Aluminum   ☐ Steel   ☐ Stainless Steel

☐ C-Channel   ☐ Z-Channel

5. Cover Dimensions

(X) Bellows Fold Height: _____   Cover Width: _____   ☐ in ☐ mm

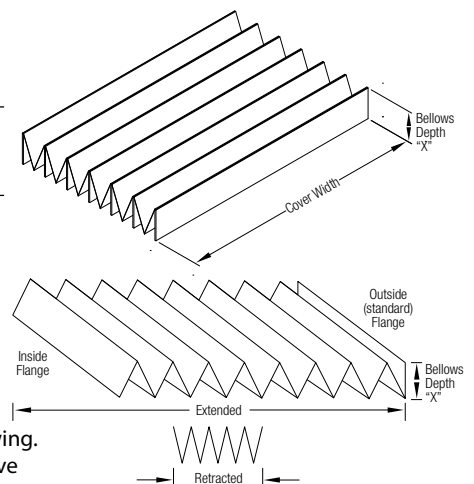## 6. Extended/Retracted/Travel Requirements

Specify extended and retracted length requirements, or indicate travel and we will advise retracted length. (Extended length = retracted length + travel distance)

Retracted Length: _____   Travel Distance: _____

Extended Length: _____   Dimensions specified in: ☐ in ☐ mm

7. End Style/Mounting

We can provide custom designed ends with mounting holes as specified per customer drawing. Orders placed without holes specified are shipped blank, without bolt holes. Reference above diagram for inside/outside flange.

End 1: ☐ Outside Flange (standard)   ☐ Inside Flange
Options: ☐ Plate ☐ Hook & Loop Fastener
☐ Other/Special (provide drawing)

End 2: ☐ Outside Flange (standard)   ☐ Inside Flange
Options: ☐ Plate ☐ Hook & Loop Fastener
☐ Other/Special (provide drawing)

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