

POLYCLUTCH® SLIP CLUTCHES



QUOTE REQUEST FORM

Date Needed By _____
Quantity _____
Company Name _____
Contact Name _____
Email _____

Address _____
City _____ State/Prov. _____
Country _____ Zip/Postal Code _____
Phone _____

1. Application Information

- Overload Protection
- Constant Tension/Force
- Soft Start/Cushioned Stop
- Other _____
- Torque Control (i.e. bottle capping, screwdriver)
- Brake
- Positioning Hinge

Operating Environment (list specific requirements, # corrosives, water, etc.):

Orientation: Vertical Horizontal

Temperature Range: _____ Type of Equipment: _____

Other Application Information: _____

2. Clutch Information

Polyclutch Part Number (if known): _____

- Mechanical Slip Clutch
- Pneumatic Slip Clutch
- One-Way Clutch
- Jaw Clutch
- Combination

Torque Range: _____ lb-in Nm

Type of Mount:

- Shaft/Shaft Mounting* *Input Shaft Diameter: _____ *Output Shaft Diameter: _____
- Shaft Through Mounting** **Input Shaft Diameter: _____ **Output Type (gear, pulley, etc.): _____
- Other: _____

RPM (at the clutch): _____

Duty Cycle (percentage of the time the clutch will be in slip condition): _____

Maximum Space Limitations (envelope size, if limitation exists): _____

Life Requirements (number of cycles, only if a specification exists): _____

TIPS:

Visit our website for an online version at dynatect.com/request-for-quote. If using the fillable PDF version, first save the PDF to your computer, then open up in Adobe Reader, fill out, then save.