

# MOULDED RUBBER BELLOWS QUOTE REQUEST

Please complete this form and email or fax to your desired location  
 info@hennig-inc.com [Find Your Regional Contact](#)

## 1 COMPANY (complete address)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## 2 APPLICATION

Quantity \_\_\_\_\_  
 Material \_\_\_\_\_ (see page 13)  
 Working Position  Horizontal  Vertical  
 Use of Bellow  Outside  Inside  
 Temperature Range \_\_\_\_\_  
 Max Speed (m/min) \_\_\_\_\_

Exposed To	Inside	Outside	Permanently	Sporadically
<input type="checkbox"/> Water	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Dust	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Oil/Grease	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Acid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Leaches	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/> Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## 3 DIMENSIONS

Stem (shaft) Diameter \_\_\_\_\_ mm  
 L (max) \_\_\_\_\_ mm  $\varnothing D_a$  \_\_\_\_\_ mm  
 L (min) \_\_\_\_\_ mm  $\varnothing D_b$  \_\_\_\_\_ mm  
 X \_\_\_\_\_ mm  $\varnothing D_1$  \_\_\_\_\_ mm  
 H1 \_\_\_\_\_ mm  $\varnothing D_2$  \_\_\_\_\_ mm  
 H2 \_\_\_\_\_ mm  $\varnothing D_i$  \_\_\_\_\_ mm

## 4 MOUNTING OPTIONS

