

Innovative Interconnections™

Sample Request Form

Schiffer GmbH Corp. 3969 W Lemon Creek Rd Bridgman, MI 49106

Date:

Complete the following form for project review. To expedite your request & to avoid unnecessary delays it is important to fill out this form completely & accurately. Send form with your samples.

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CUSTOMER CONTACT	INFORMATION	ON:				
First Name		Last Name				
Company						
Address						
City	State		Zip		Country	
Telephone	Fax		Email			
Rep./Distr. Company			Salesper	Salesperson		
APPLICATION INFORM	/ATION:					
Application Description:						
Materials to be spliced toge	thar:					
Material Description	ther.	Dimensio	ons	Additional	Information	
1						
2						
3						
Acceptance Criteria:						
Minimum pull strength	Appear	rance		Additional	Requirements	
Spliceband Width (Check on	e): 2MM (.0	078") 4MM (.	156") ☐6M	M (.234")	Factory Recommendation	
Splice Material (Check one):	Brass	Tinned Brass C	DA 725 Ma	anat Diaraina	Factory Recommendation	
Splice Material (Check one).	Brass	Tinned BrassC	DA 725 MIA	gnet Piercing	Factory Recommendation	
PROJECT INFORMATION	ON:					
Number of splices per a	ssembly:	Asse	mbly's annua	l production	on:	
If not a new project desc	cribe current m	nethod used for a	ttaching mate	erials:		
Is this project budgeted?)	If so wh	at is the budg	get range:		
Do you have existing A	utosplice equip	oment? No	Yes, M	odel #		
Describe your end mark	et:]	Ultimate End	product:		
Would you like informat	tion about Aut	osnlice assembly	services?	ПП	o Yes	

Check only one:	Check only one:
☐ This request is for feasibility & tooling only. No samples are required. information	Send quotation & cor To address listed
☐ This request is for samples & quotation. to Return spliced parts.	☐ Send quotation & com Following address:
Draw a sketch of the components and how they are to be attack	hed
ADDITIONAL NOTES	

Please send this form along with your samples to: Schiffer GmbH Corp., 3969 W Lemon Creek Rd, Bridgman, MI 49106 Ph: 269-465-3400