

\* Company name:.....

\* Contact person:....

## **CUSTOM SPRING REQUIREMENT FORM**

To be attached at every communication between customer and Special Springs.

## Part 1: to be completed for all type of springs

All information with:

\* is binding.

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\* Date of request:

\*\* is important.

* Type of spring:  Compression Traction Torsion Other	Technical specifications attached:  Drawing reference:		
** Target price for each spring:	Type of application:		** End Customer:
* Quantity requested at each order:  * Single or multiple orders:  ☐ Single ☐ Multiple	* Timelapse:		* Fatigue tests requested: ☐ Yes ☐ No
* Surface protection/Supply specs:  Oiled Painted color Other	** Material composition:  ** Material standard:		Other specifications:  Binding Not binding
Part 2: to be completed in ca         da =	nm	$\begin{array}{c c} & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & \\ & & & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & & \\ & \\ & & \\ &$	$ \frac{\delta}{\delta} $ $ \frac{F_1}{F_2} $ $ \frac{F_2}{F_{c.th.}} $ $ \frac{F_1}{F_{c.th.}} $ $ \frac{F_2}{F_{c.th.}} $ $ \frac{F_2}{F_{c.th.}} $
Remarks:			

\* Request of offer number:

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