

QUOTE REQUEST FORM

Solid Carbide Router/Milling Cutter



Customer Information

Company Name _____ Project# _____ Date _____

Phone Number _____ Email _____

Quantity Needed _____ Annual Usage (if blanket order): _____

Tell Us About Your Application

Workpiece

Material _____

If Composite material, please fill in below:

Layers	Thickness	Material
Top		
Core		
Bottom		
Other		

Machine Information

Brand _____

Machine Type _____

Feed (select one): Mechanical Manual

Max Feed Rate _____

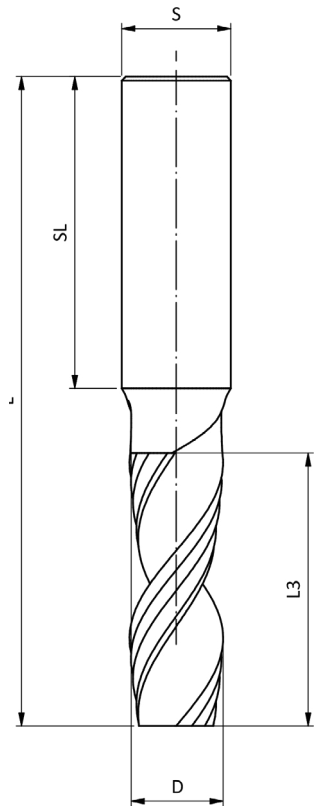
Max RPM _____

Clamping System _____

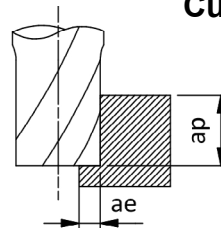
Tool Body

Tool Dimensions	
L	
L2	
L3	
SL	
S	
D	

- _____ # of flutes
- Plunge tip
 - Internal Cooling
 - RH Rotation
 - LH Rotation



Cutting Detail



Cutting Dimensions	
ae	
ap	

DO YOU HAVE A TOOL DRAWING OR SKETCH?

Email us at sales@gdptooling.com