

INQUIRY FORM FOR THREAD ROLLS

(all brands)

Contact details

Customer No. (if available)	
Company	
Address	
Contact person	
Phone/Fax	
Email	



Thread roll details

Brand		
Type of rolling head	<input type="checkbox"/> axial	<input type="checkbox"/> tangential
Rolling head designation		
Quantity (sets/pair)		
Thread dimensions		
Lead / start		
Ident No. (if available)		

Comments

Date / Signature	
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