MAGWERKS
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4024 West 10th Street
Indianapolis, IN 46222

Magnetic Particle Inspection Application Data Sheet

The following information is necessary for us to provide a meaningful system / part match and quotation. Please answer each question as accurately as possible to insure a prompt response. Supplement this data sheet with additional comments, drawings and/or photos necessary to complete the application description.

Date: Type of proposal please choose Due Date:

Customer Information:

Company Name:
Division:
Address:
City: State: Zip:
Contact Engineer: Tel: Ext: email:
Fax:

General Part Specifications:

Part Name:
Part Description:
Basic Part Dimensions and Weight:
Part Alloy:
Part Condition before inspection: please choose please choose
Manufacturing Process: please choose
Heat Treatment: not known
Samples: please choose Drawings: please choose Photographs: please choose
Are critical inspection areas identified: please choose
Are your "Plant's Machine Build Specifications" to be used for equipment construction: please choose
If so, are they provided: please choose

Electrical Requirements:

please choose please choose
Plant ampacity available to power the machine:

Testing:

Maximum desired part opening between head and tail stock:
Coil Size Desired: please choose
Type of equipment desired: please choose
Present production rate required per hour/per machine: Future rate per hour/per machine:
Number of shifts currently using machine: Future:
Prefered maximum number of persons required for machine operation, per shift/per machine:
What testing standards are going to be used: not known
Bath requirements: please choose
Type of testing: please choose What type of demagnetizing is required: please choose
What is the residual field strength limited to in Gauss:
What brand and model gaussmeter is used to measure the residual field strength:
What are the known causes of defects:

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Comments:

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