

Expandable Cavity Quote Request Form Email Completed form to: cs_specials@dme.net

Company name:	-		DME account #:			
Contact name:		P.O. #:				
Phone:			_ FAX: _ E-mail:			
Address:						
City:			State/Province:			
ZIP/Postal Code:			Country:			
Shipping method:	UPS 2nd Day Air	☐ UPS Next Day	☐ FedEx	☐ Other		
Expandable (Cavity Requireme	nts				
I. POLYMER SPE	ECIFICATIONS:					
A. What is the	material to be molded?					
B. What is the	process temperature?		Filled	Unfilled	Glass	☐ Mineral
II. DIMENSIONS	OF EXPANDABLE CAVITY	: (Part print is required)				
A. Specify larg	gest diameter to be molded					
	allest diameter to be molded	1				
C. Specify maj	jor diameter of undercut or t	L I				
D. Specify min	nor diameter of undercut or t	L I				
III. MOLDED PAR	T LENGTH:					
A. Molding Ler	ngth:	Cavity)				
B. Mold Shut-o						
IV. EXPANSION R	REQUIREMENTS: (See Exp	andable Cavity and Stri	ker Insert Design)			
A. Critical Exp	ansion per side:					
B. Loss of exp	pansion (.050in/in):					
C. Clearance ((Air) between plastic and ste	eel upon expansion:	.005			
V. MOLD LAYOU	Т					
A. Distance from	om gate (center to center):					
B. Number of						
	☐ New Mold					