Arctic Cast® Shroud System



Made-To-Order Quote Request Form — Copy and Fax Us (630-350-0232) Your Requirements

| Customer Information | Company | | City | Stata |
|---|---------------------------|------------------|------------------------|--|
| Name:Phone: | | | | State: |
| Extruder Barrel Manufacturer: | | | Model Number: | |
| Resin Type: | | | | |
| When submitting this form, please | be sure to include an ex | ktruder barrel | sketch or drawing t | hat includes the following: |
| * Extruder Barrel Support(s) | * Number of Heating Z | iones | ★ Vent Location(s) | * Zone Probe Location(s) |
| | * Pressure Tap Location | | | |
| Note: To assist Tempco in designing | a shroud system, please J | provide digital | images (in .jpg forma | t) of the extruder barrel. |
| Ref. ∠ 0° Air GHeater ID & Specifications | Outlet | A Length "I | © F | Drawing Reference Angle 315° 45° 270° 90° 225° 135° |
| (For replacement of existing Temp A. Shroud Width / Zone Length "L' B. Maximum Shroud OD: | · | | | |
| | • | anginiceting uni | ess specified by cusic | mici j |
| Shroud Component Specification C. Maximum Blower Clearance: | лıs | | | |
| D. Standard Shroud Assembly Orient | ntation Shown: Air Outle | t at 0°. Blower | at 180° | |
| For alternate orientations, rotate | | | | |
| E. Zone T/C Probe(s): Quantity: | | | | |
| Location: Centered at Top (s | | | | |
| Blower Specifications | | | | |
| F. Configuration: Single Stock Tempco Blower (Engineer P/N: or CFM | 0 1 | ications if none | specified) | |
| Optional Inlet Guard (available for Optional Blower Extension: How Mounting Dimensions: Length | rizontal | Custom (| (Consult Tempco.) | |
| *Customer Supplied Blower (Ple | | | | |
| Manufacturer: | P/N: | CFM: | Volts: | Operating Frequency:Hz |
| Heater Specifications G. Extruder Barrel OD/Heater ID: _ | Wattage po | er Half: _ | Voltage per H | Ialf: |
| | | | | |

★ WARNING: Cancer and Reproductive Harm - www.P65Warnings.ca.gov.