

OMNI-X

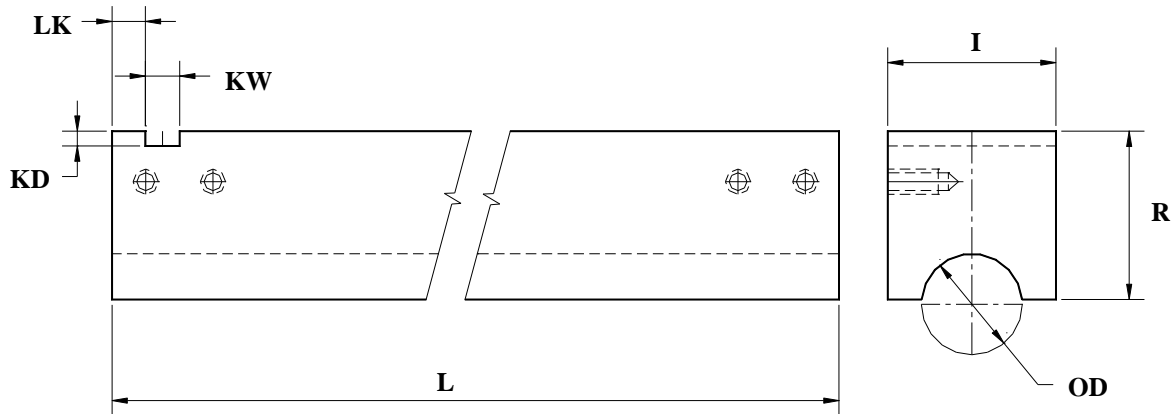
PRESSURE DIE ORDER FORM

2751 West Mansfield Ave., Englewood, CO 80110

1-800-275-6664

FAX: 303-789-4755

Company Name _____
Purchase Order# _____
Job# _____



WHEN ORDERING PRESSURE DIE, PLEASE SPECIFY:

Keyway: Width (KW) _____ x Depth (KD) _____ Location (LK) _____
Length (L) _____

OMIT WHEN ORDERING COMPLETE SETS OF TOOLING, ITEMS ALSO FOUND ON BEND DIE ORDER FORM

Make and Model of Bending Machine _____
Serial # of Bending Machine _____
Rotation of Arm (Clockwise or Counter Clockwise) _____
Center Line Height of Tube Groove (CLH) _____
Interlock Yes No 6% Lip (L) Yes No

TUBE INFORMATION:

Outside Diameter (OD) _____
Center Line Radius (CLR) _____

OPTIONAL INFORMATIONS:

Interlock Dimension or Height (I) _____
Reach Dimension (R) _____

Special Instructions:
