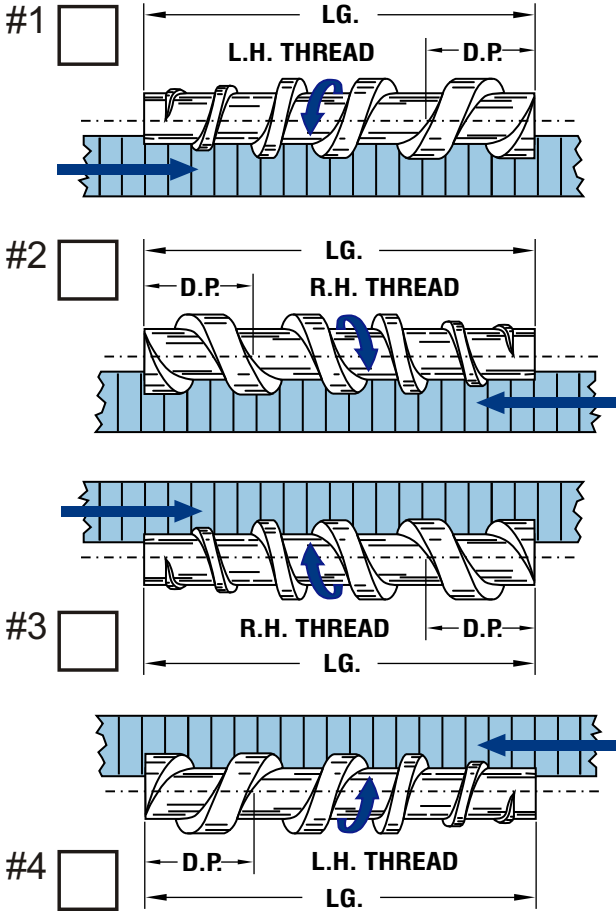


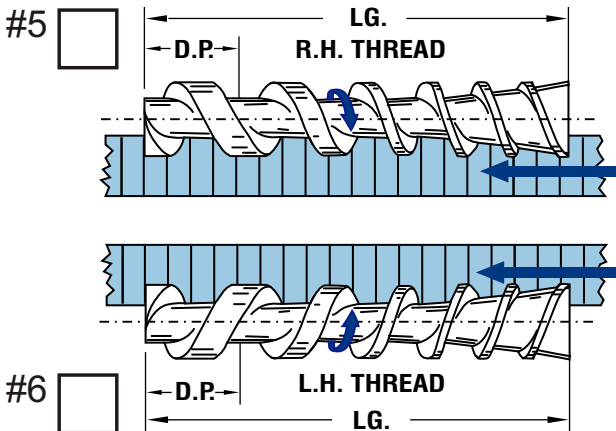
## Straight Root

Check Direction and Rotation Required



## Inverse Taper

Check Direction and Rotation Required



CSS OFFICE USE ONLY

SO # T- \_\_\_\_\_

DATE \_\_\_\_\_

Complete all information below

Date \_\_\_\_\_

PO# \_\_\_\_\_

Customer \_\_\_\_\_

Address \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Ship Via \_\_\_\_\_

Delivery Required \_\_\_\_\_

Type of Machine \_\_\_\_\_

Manufacturer \_\_\_\_\_

Container Size \_\_\_\_\_

Material of Screw \_\_\_\_\_

Color \_\_\_\_\_ Speed/Min \_\_\_\_\_

Max Diameter \_\_\_\_\_ Root Diameter \_\_\_\_\_

Length of Screw \_\_\_\_\_

Vertical Height Axis Of Screw to Conveyor \_\_\_\_\_ Discharge Pitch \_\_\_\_\_

Shaft Diameter \_\_\_\_\_ Shaft Mat'l \_\_\_\_\_

Bushing I.D. \_\_\_\_\_ Bushing Mat'l \_\_\_\_\_

Bearing Number \_\_\_\_\_ Key \_\_\_\_\_

Please include shaft or bushing detail drawing with order

Use other side for additional information