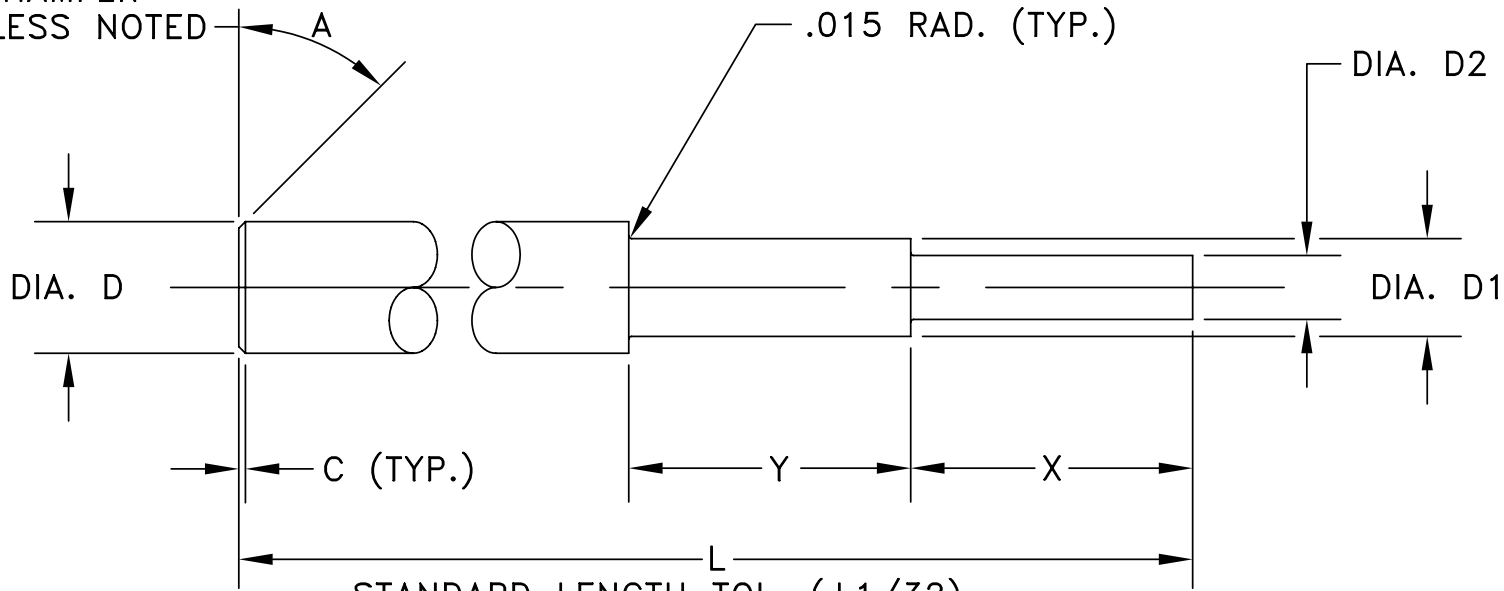



STD. CHAMFER  
UNLESS NOTED



STANDARD LENGTH TOL. ( $\pm 1/32$ )  
UNLESS OTHERWISE NOTED

ITEM	TOLERANCE				
LENGTH (L):					
DIAMETER (D):					
DIAMETER (D1):					
DIAMETER (D2):					
ANGLE (A):		MATERIAL:		PLATING TYPE: (IF ANY)	
CHAMFER (C):		<input type="checkbox"/> STANDARD	<input type="checkbox"/> STAINLESS STEEL		
DIM. (Y):		DRAWN BY:	DATE	DO NOT SCALE	TITLE <b>SHAFT REDUCTION</b>
DIM. (X):		APPROVAL:	DATE		
CUSTOMER AUTHORIZATION:		 THE LINEAR MOTION PEOPLE		NOOK INDUSTRIES, INC. 4950 EAST 49TH STREET CUYAHOGA HEIGHTS, OHIO 44125-1016 USA	
					DWG. NO.

customer reference: \_\_\_\_\_



# Request for Quotation



Fax: 216.271.7020

Date: \_\_\_\_\_

Pages (including this cover): \_\_\_\_\_

Customer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Country: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail \_\_\_\_\_

Template Name

Quantity

_____	_____
_____	_____
_____	_____

Fax a copy of your drawing or select a template that best matches your application requirements.

1. Fill in all available data with tolerance in either inch or metric units.
2. If a specification is not on the template add it, the applicable dimensions and tolerances.
3. If a specification is not required but is on the template, draw a line through it, and mark the item description with N/A.
4. Include additional notes to the template to aid in quoting and manufacturing.

Fax this cover sheet along with template drawing to **CUSTOMER SERVICE AT: 216.271.7020**

For questions or help in selecting the best solution for your application requirements, please contact

**APPLICATION ENGINEERING** at: **800.321.7800** or e-mail: **engineering@nookind.com**

These templates are available in pdf format online  
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