



INQUIRY FORM FOR THREAD ROLLS

(all brands)

Contact details

Customer No. (if available)	
Company	
Address	
Contact person	
Phone/Fax	
Email	



Thread roll details

Brand	
Type of rolling head	<input type="checkbox"/> axial <input type="checkbox"/> tangential
Rolling head designation	
Quantity (sets/pair)	
Thread dimensions	
Lead / start	
Ident No. (if available)	

Comments

Date / Signature	
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