

Ice-Eradicator® Quotation Worksheet

For selection assistance please consult "PCI PULLEY SELECTION GUIDE" or call PCI Customer Service at 989.358.6149.

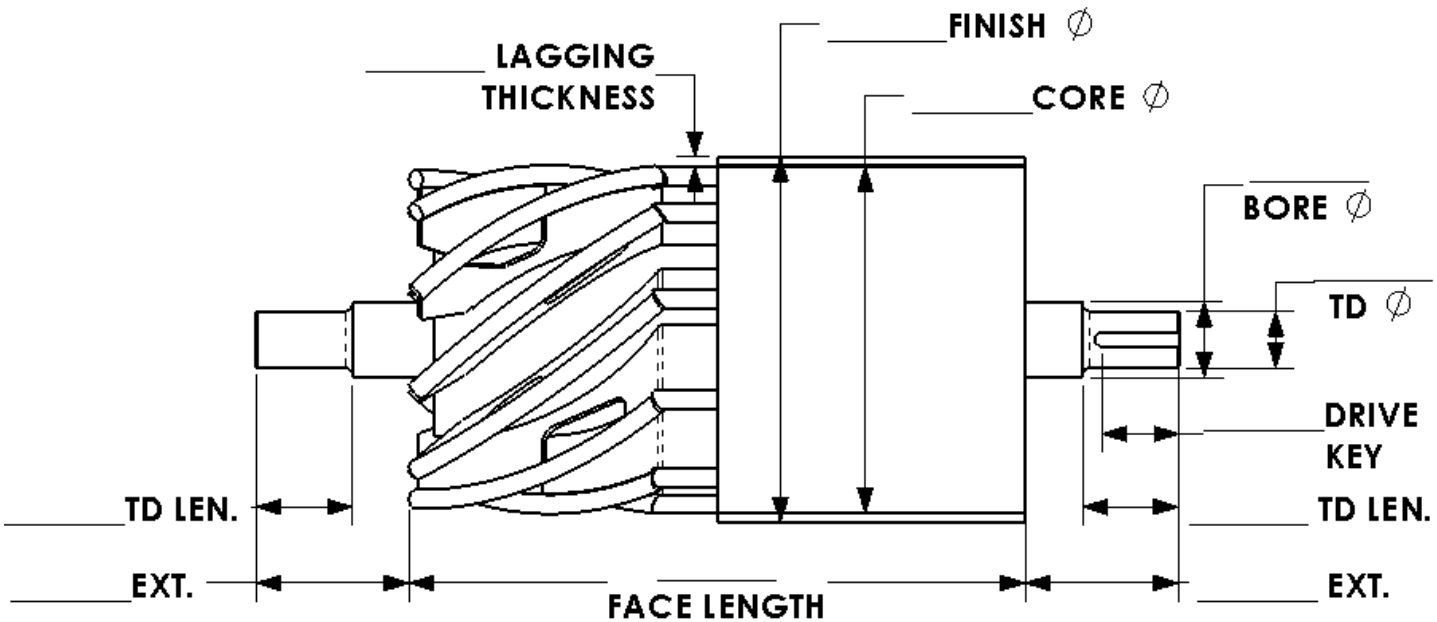


COMPANY NAME / BRANCH NUMBER _____ DATE _____

COMPANY PHONE NUMBER _____ EMAIL ADDRESS _____

YOUR NAME _____ FAX NUMBER _____

QUANTITY _____ ACCESSORIES REQUIRED: TAKE-UP FRAME PART# _____



<p>PULLEY PROFILE: <input type="checkbox"/> Flat Face <input type="checkbox"/> Crowned Face <input type="checkbox"/> V-Groove: _____ Section Special _____ X _____ X _____</p> <p>PULLEY TYPE: <input type="checkbox"/> Drum <input type="checkbox"/> Eradicator® <input type="checkbox"/> Wing</p> <p>PULLEY CONFIGURATION: (choose one)</p> <p>DRUM: <input type="checkbox"/> FC Series <input type="checkbox"/> MC Series <input type="checkbox"/> Heavy Duty <input type="checkbox"/> Mine Duty</p> <p>WING: <input type="checkbox"/> Standard Duty <input type="checkbox"/> Heavy Duty <input type="checkbox"/> Mine Duty <input type="checkbox"/> Other _____</p> <p>ERADICATOR®: <input type="checkbox"/> Standard Duty <input type="checkbox"/> Heavy Duty <input type="checkbox"/> Mine Duty</p> <p>MATERIAL: <input type="checkbox"/> Mild Steel <input type="checkbox"/> Stainless Steel</p> <p>HUB TYPE:</p> <p>TYPE A: <input type="checkbox"/> With Welded Shaft</p> <p>TYPE B: <input type="checkbox"/> Keyed Hub with Set Screws</p> <p>CH&B: <input type="checkbox"/> XT® <input type="checkbox"/> QD® <input type="checkbox"/> HE <input type="checkbox"/> TAPERLOCK® Preferred Hub Size _____</p> <p>KLD: <input type="checkbox"/> Keyless Locking Devices Brand Preference _____</p> <p><i>Note: Internal bearings not available on Ice-Eradicator® pulleys.</i></p>	<p>Ice-Eradicator® Operating Parameters</p> <p>LOCATION OF INSTALL: <input type="checkbox"/> U.S.A. <input type="checkbox"/> Canada <input type="checkbox"/> Other (Specify) _____</p> <p>BELT SPEED (Ft./Min.): _____</p> <p>HOURS PER DAY IN OPERATION: _____</p> <p>DAYS PER WEEK IN OPERATION: _____</p> <p>WEEKS PER YEAR IN OPERATION: _____</p> <p>BEARING CENTERS: _____</p> <p>BEARING MANUFACTURER: _____</p> <p>BEARING PART NUMBER: _____</p> <p>LOWEST OPERATING TEMP.: _____ °F <input type="checkbox"/> °C</p>
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LAGGING

Type: SBR CARBOXYLATED NITRILE EPDM NEOPRENE NITRILE URETHANE SWRT WELD-ON CERAMIC

Food Grade Durometer _____ Color Preference _____ Grooving: HERRINGBONE CHEVRON DIAMOND



(989)358-6149

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