



NATIONAL

NATIONAL TOOL AND MANUFACTURING CO.

Hot Runner Information Worksheet

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Send Print Files To: ntmesti@ntm.com

Date: _____ E-Mail: _____

Customer: _____ Phone: _____

Contact: _____ Fax: _____

Reference No.: _____

Description/Product: _____

FOR NTM™ USE ONLY.
Quote #: _____
Estimator: _____
Date: _____

Material & Part Information

Material: _____ Melt Temp.: _____ Shot Weight (grams) _____

Gate Dia.: _____ Wall Thickness of Part at Gate Area: _____

Gate Vestige Requirements _____

General Information

Machine Type: _____ Tonnage: _____ Capacity: _____

Mold Size: _____ Platen Size: _____

Cycle Time: _____ Color Change? (circle one): YES NO

Type of System Required (check all the apply)

_____ New Mold _____ Retrofit _____ Current 3-Plate _____ Other Hot Runner

_____ Manifold & Nozzles Only _____ Complete HOTTOP™ _____ Temperature Controller

Type of Bushing Required:

_____ Point _____ Flow _____ Sprue _____ Valve Gate System

Standard Manifold: # of Drops and Configuration: _____

Catalog #: _____ X: _____ Y: _____

Standard HOTTOP™: Cat. #: _____ X2: _____ Y2: _____

Bushing Selection: Cat. #: _____

Deadlines

Quotation Required By Date: _____

Drawing Required By Date: _____

Delivery of System By Date: _____

Form Initiated By: _____ Date: _____