

SAWS TEST APPLICATION DATA SHEET

Kyocera Sales Rep.: _____
Customer Name: _____ Date: ____/____/____
City/State: _____ Distributor: _____
Phone: _____ Fax: _____ E-Mail: _____
Contact: _____ Title: _____ Extn.: _____

GENERAL INFORMATION

(Application) B/P or Job # _____
 SC C-Tipped H.S.S. Saw Dia. _____ Saw Width _____ Tolerance _____
Arbor Hole Dia. _____ # Teeth _____ Special Tooth Form _____
Keyway (Y/N) _____ Keyway Dimension _____ Hub (Y/N) _____
Hub Dimension: Dia. _____ Thickness _____ Rake Angle _____
Positive / Negative _____ Surface Treatment _____
Unique Job Details _____

JOB APPLICATION

Operation _____ Slot Width _____ Tolerance _____
Depth of Cut _____ Tolerance _____ Material _____
Hardness _____ Machine Tool _____ Condition _____
Speed _____ Feed _____ Coolant Type _____ Mix _____
Are saws ganged? (Y/N) _____ If yes, tolerance required _____
Form to be generated _____ (Sketch or B/P helpful)

COMPETITION

Brand Name _____ Price (\$) _____
Delivery _____ Annual Usage _____
Current performance info. or problem _____
Criteria for successful test _____

TEST EVALUATION

PO# _____ Date _____ Dist. PO# _____
Results _____
Were you present for test? Y/N _____ Comments _____