POLYCLUTCH® SLIP CLUTCHES
QUOTE REQUEST FORM

DYNATECT®
DYNAMIC EQUIPMENT PROTECTION

Date Needed By_____
Quantity_____
Company Name _____
Contact Name_____
Email_____

Address _____
City _____ State/Prov. _____
Country _____ Zip/Postal Code _____
Phone _____

1. Application Information

☐ Overload Protection
☐ Constant Tension/Force
☐ Soft Start/Cushioned Stop
☐ Other _____

☐ Torque Control (i.e. bottle capping, screwdriver)
☐ Brake
☐ Positioning Hinge

Operating Environment (list specific requirements, # corrosives, water, etc.):

_____

Orientation: ☐ Vertical ☐ Horizontal

Temperature Range: _____ Type of Equipment: _____

Other Application Information: _____

2. Clutch Information

Polyclutch Part Number (if known): _____

☐ Mechanical Slip Clutch ☐ Pneumatic Slip Clutch ☐ One-Way Clutch ☐ Jaw Clutch ☐ Combination

Torque Range: _____ ☐ lb-in ☐ Nm

Type of Mount:

☐ Shaft/Shaft Mounting* *Input Shaft Diameter: _____ *Output Shaft Diameter: _____

☐ Shaft Through Mounting** **Input Shaft Diameter: _____ **Output Type (gear, pulley, etc.): _____

☐ Other: _____

RPM (at the clutch): _____

Duty Cycle (percentage of the time the clutch will be in slip condition): _____

Maximum Space Limitations (envelope size, if limitation exists): _____

Life Requirements (number of cycles, only if a specification exists): _____

TIPS:

Visit our website for an online version at **dynatect.com/request-for-quote.** If using the fillable PDF version, first save the PDF to your computer, then open up in Adobe Reader, fill out, then save.