Contact Name: ___________________________________________
Company Name: _________________________________________
Phone: __________________________________________________
Fax: _____________________________________________________
Email: _________________________________________________

Specifications
Quantity: _____ Annual Usage: _____
RPM: __________________________
Application: _______________________________________

Brush Specifications:
A. Outside Diameter: _________
B. Inside Diameter: _________

Circle the Critical Dimension:
OD  ID

C. Brush Face Length: _________

D. Filament Material*: _________

E. Filament Diameter: _________

Level (flat) ______ Crimped (wavy) ______

F. Channel Size:  A  B  C  D  F  G  K

Density: Light  Medium  Heavy

Stiffness: Soft  Medium  Stiff

I. Channel Material:
Galvanized, T-304 S/S, Other S/S available on request

J. Pitch*: Tight Wound?  Yes  No
Or specify the distance between center of consecutive turns ______

Circle one:
Right Hand Wound  Left Hand

---

Channel Dimensions

<table>
<thead>
<tr>
<th>Section</th>
<th>X</th>
<th>Y</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>0.095</td>
<td>2.413</td>
</tr>
<tr>
<td>B</td>
<td>0.150</td>
<td>3.810</td>
</tr>
<tr>
<td>C</td>
<td>0.180</td>
<td>4.572</td>
</tr>
<tr>
<td>D</td>
<td>0.240</td>
<td>6.096</td>
</tr>
<tr>
<td>F</td>
<td>0.313</td>
<td>7.950</td>
</tr>
<tr>
<td>G</td>
<td>0.350</td>
<td>8.890</td>
</tr>
<tr>
<td>K</td>
<td>0.500</td>
<td>12.700</td>
</tr>
</tbody>
</table>

Mandrel Specifications:
Solid  Tubular

Material Specification:
B2 OD: __________  B3 ID: __________

C2 Keyway Dimensions __________

Distance from end of mandrel to center of keyway: __________

Threaded: Yes  No  Type & Size of Threads: __________

Secure Brush: Weld  Other: __________

C3 Overall Length of Mandrel: __________

Brush Centered on Mandrel?  Yes  No  Specify: __________

Notes: (special tolerance, etc) __________

---

* Consult your Sealeze Representative for available materials.