



NORTHERN ILLINOIS MOLD TEL. (847) 669-2100  
 11200 EAST MAIN STREET FAX (847) 669-2154  
 HUNTLEY, ILLINOIS 60142

COMPANY NAME: \_\_\_\_\_  
 PART NAME: \_\_\_\_\_  
 NO. OF CAVITIES: \_\_\_\_\_ PART NO: \_\_\_\_\_  
 NO. OF CAVITIES: \_\_\_\_\_ PART NO: \_\_\_\_\_

**TYPE OF MOLD**    \_\_\_ THERMOSET    \_\_\_ INLINE INJECTION    \_\_\_ INJECTION COMPRESSION    \_\_\_ COMPRESSION TRANSFER    \_\_\_ THERMOPLASTIC INJECTION    \_\_\_ OTHER

**MOLD CONSTRUCTION**

- \_\_\_ Standard
- \_\_\_ 3 Plate
- \_\_\_ Stripper
- \_\_\_ Hot Runner Bar
- \_\_\_ Insulated Runner
- \_\_\_ Cold Runner Manifold
- \_\_\_ Vacuum System
- \_\_\_ Other

**SPECIAL FEATURES**

- \_\_\_ Guide Pins & Bushings in EJ Bar
- \_\_\_ Spring Loaded EJ Bar
- \_\_\_ Inserts Molded in Place
- \_\_\_ Ejector Bar/Stationary Side
- \_\_\_ Accelerated EJ
- \_\_\_ Positive EJ Return
- \_\_\_ Hyd. Operated EJ Bar
- \_\_\_ Parting Line Locks
- \_\_\_ Other: \_\_\_\_\_

**EJECTION**

Cavity	Forces
___ EJ Pins	___
___ EJ Blade	___
___ Sleeve	___
___ Stripper	___
___ Air	___
___ Special Lift	___
___ Unscrewing(Auto	___
___ Removable Insert	___
___ (Hand)	___
___ Other	___

**MATERIAL**

Cavity	Forces
___ Tool Steel	___
___ Beryl. Copper	___
___ Steel Sinking	___
___ Other	___

**HARDNESS**

Cavities	Forces
___ Hardened	___
___ Pre-Hard	___
___ Soft	___
___ Other	___

**TEMP CONTROL**

Cavity	Core
___ Inserts	___
___ Retainer Plate	___
___ Other Plates	___
___ Bubblers	___
___ Heaters	___
___ Other	___
(Specify) _____	

**MOLD BASE**

\_\_\_ #1    \_\_\_ #2    \_\_\_ #3

**FINISH**

Cavity	Forces
___ SPI/SPE#	___
___ Mach Finish	___
___ Chrome Plate	___
___ Texture	___
___ Other	___

**SIDE ACTION**

Cavities	Forces
___ Angle Pin	___
___ Hydraulic Cyl	___
___ Air Cylinder	___
___ Cam	___
___ EJ Activated	___
___ Spring Load	___
___ Other	___

**TYPE OF GATE**

- \_\_\_ Edge
- \_\_\_ Center Sprue
- \_\_\_ Sub-Gate
- \_\_\_ Pin Point
- \_\_\_ Direct Gate
- \_\_\_ Gate Shut-Off
- \_\_\_ Other

**ENGRAVING**

- \_\_\_ Yes
- \_\_\_ No

**DESIGN BY**

- \_\_\_ Moldmaker
- \_\_\_ Customer

**TITLE OF DESIGN**

- \_\_\_ Detailed Design
- \_\_\_ Layout Only

**MICRO SWITCHES**

- \_\_\_ Supplied By \_\_\_\_\_
- \_\_\_ Mounted by Moldmaker

**Approximate Mold Size** \_\_\_\_\_

<b>Heaters Supplied By</b>	___ Moldmaker	___ Customer
<b>Duplicating Casts</b>	___ Moldmaker	___ Customer
<b>Mold Try-Outs By</b>	___ Moldmaker	___ Customer
<b>Mold Flow Analysis</b>	___ Moldmaker	___ Customer
<b>Cooling Analysis</b>	___ Moldmaker	___ Customer
<b>Material Supplied By</b>	___ Moldmaker	___ Customer
<b>Accurate Model/s or Master/s By</b>	___ Moldmaker	___ Customer
<b>1st Article Inspection By</b>	___ Moldmaker	___ Customer

F.O.B. our plant, terms are 1/3 down, 1/3 upon delivery,  
 1/3 net 30 days, unless otherwise stated in cover letter.

Date \_\_\_\_\_  
 Quote # \_\_\_\_\_