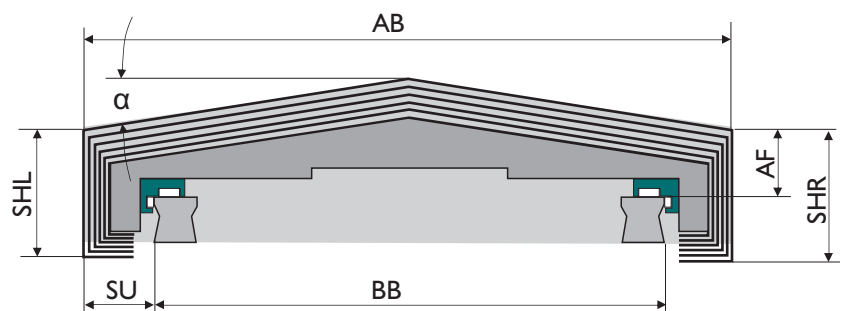
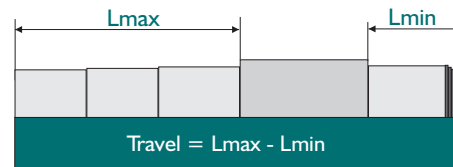




Request Form for Telescopic Steel Covers

Dimensions

Lmax _____ mm
 Lmin _____ mm
 Travel _____ mm
 Width of slideway BB _____ mm
 Width of cover AB _____ mm
 Cover height lhs SHL _____ mm
 Cover height rhs SHR _____ mm
 Cover height
 above slideway AF _____ mm
 Angle (α) _____ °
 Dimension SU _____ mm



Standard Shapes

Requested shapes:

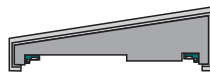
Shape 1
flat



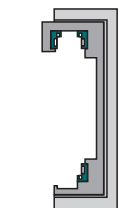
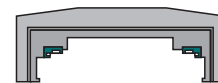
Shape 2
roof shape



Shape 3
slanted



Shape 4
flattened roof shape



Shape 5
frontal

Questions of the use of the cover(s)

Kind of machine: _____

Mounting of the cover: from top to slide on

Application: horizontal vertical frontal slanted _____ °

Machining: with coolant dry

Material: steel stainless steel

Walkable: yes no

Travel speed V: _____ m/min

Acceleration a: _____ m/sec²

Special requirements: _____

Quantity: 1x lhs 1x rhs series _____ units/sets

Please add a sketch or a drawing,
stating the installation situation
with possible interference edges.

Name of company _____

Street _____

Contact person _____

Phone/Fax _____

City, Country _____

E-Mail _____

Please send this request form by fax to +49 89 999 399-85 or by E-Mail to info@steinbock-industrie.de