

Customer code	Date	Company adress and contact person (or: business card)		
<input type="checkbox"/> Request <input type="checkbox"/> Trial <input type="checkbox"/> Order <input type="checkbox"/> Notice	Representative	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>		
	Additional visitors			
<input type="checkbox"/> Payable after successful approval <input type="checkbox"/> Acknowledgement	Delivery <input type="checkbox"/> Week _____ <input type="checkbox"/> Date _____			
Grinding process <input type="checkbox"/> Rough grinding <input type="checkbox"/> Semi grinding <input type="checkbox"/> Finish grinding <input type="checkbox"/> Cylindrical grinding <input type="checkbox"/> Surface grinding <input type="checkbox"/> Profile grinding <input type="checkbox"/> Tool grinding <input type="checkbox"/> Cut-off grinding <input type="checkbox"/> _____ _____				Workpiece Workpiece designation _____ _____ Material designation or code _____ Hardness <input type="checkbox"/> HV <input type="checkbox"/> HRc <input type="checkbox"/> HB _____
		Grinding machine Manufacturer _____ Type _____ Spindle (drive power and speed) _____ kW _____ n _{max}	Coolant <input type="checkbox"/> Oil <input type="checkbox"/> Emulsion <input type="checkbox"/> Without coolant Designation _____ Dressing <input type="checkbox"/> Without dressing <input type="checkbox"/> Stationary dresser <input type="checkbox"/> Dressing disc <input type="checkbox"/> Plunge dressing roll <input type="checkbox"/> Unidirectional <input type="checkbox"/> Counterdirectional	
Grinding wheel Abrasive <input type="checkbox"/> CBN <input type="checkbox"/> Diamond Bond <input type="checkbox"/> Electroplated <input type="checkbox"/> Vitrified <input type="checkbox"/> Metal bond <input type="checkbox"/> Resinoid Codified in FEPA standard _____		Wheel diameter D _____ mm Wheel rim width U oder W _____ mm Grindig layer depth X _____ mm Geometry _____ Bore diameter H _____ mm Grinding wheel width T _____ mm	Process data Allowance _____ mm Peripheral wheel speed v _c _____ m/s Infeed (depth of cut) a _e _____ mm Feed rate v _f _____ mm/min Peripheral workpiece speed v _w _____ m/min Material removal per workpiece _____ mm ³	Aim of process Surface quality <input type="checkbox"/> R _a , <input type="checkbox"/> R _z , <input type="checkbox"/> R _t _____ μm Tool life <input type="checkbox"/> Parts, <input type="checkbox"/> mm ³ , <input type="checkbox"/> m _____
Competitor Manufacturer _____ Price (<input type="checkbox"/> €, <input type="checkbox"/> \$, <input type="checkbox"/> _____) _____ Specification and customer satisfaction _____ _____ Annual requirement _____		Remarks / Sketch 		