a DOVER COMPANY

CONTACT INFORMATION

FIRST NAME:		LAST NAME:			DATE:	
COMPANY NAME:		EMAIL:			PHONE NUMBER:	
PROJECT NAME:		ANNUAL USAGE:				
APPLICATION DATA						
BEARING ORIENTATION		APPLIED	BENDING MOMENT	(NORM):	APPLIED BENDING	5 MOMENT (MAX):
APPLIED THRUST LOAD (NORM):		APPLIED THRUST LOAD (MAX):			APPLIED RADIAL LOAD (NORM):	
APPLIED RADIAL LOAD (MA	X):	BEARING	SPEED RPM			
BOLT PATTERNS & DIMENSIONS:						
BOLT CIRCLE DIAMETER:	INNER	RACE	OUTER RACE	0	OVERALL BEARING	
HOLE OR THREAD SIZE:				IN	SIDE DIAMETER:	
NUMBER OF BOLTS				TI	HICKNESS:	
GEAR DATA						
GEAR TYPE:		DIAMTERAL PITCH:			STUB TOOTH:	
NUMBER OF TEETH:		INDUCTION HARDENED:			FACE WIDTH:	
ADDITIONAL SPECIFICATIO	NS:					
TWG USE ONLY						
SUBMITTED BY:		APPROVED BY:			ER NUMBER:	