



SAMPLING REQUEST FORM
TARGET PLASTICS TECHNOLOGY
 400 WINDY POINT DRIVE
 GLENDALE HEIGHTS, IL. 60139
 PH: 630-545-1776 / FAX 630-545-1700

PLEASE COMPLETE THE FOLLOWING INFORMATION AND RETURN THIS SHEET ALONG WITH PART SAMPLE AND PRINT (WHEN AVAILABLE), AT LEAST 1 (ONE) WEEK PRIOR TO SAMPLING.

COMPANY SAMPLING FOR:				CONTACT:	
REQUESTED DATE OF SAMPLING:				PART NAME:	
JOB #		MOLD E.T.A TO TARGET:(morn/noon/eve):			
MATERIAL:				SUPPLIED BY:	
TOOL SIZE:	L		W		H
					# PARTS NEEDED
MIN. PARTING LINE OPENING REQUIRED (LEADER PINS CLEAR, SPRUE OUT OF FRONT HALF):					
OFF SET SPRUE BUSHING			OFFSET AMOUNT		
RUNNER TYPE:				# OF CAVITIES	
HOT RUNNER SYSTEM:				# OF ZONES	
TYPE OF GATE (sub gate, tab gate, edge gate, etc.)					
TYPE OF EJECTION (hyd. Cyl., pins, blades, sleeves, lifters)					
EJECTOR PLATE THREAD SIZE (if positive, pullback is needed)					
SIDE ACTIONS (mech/hyd/spring-loaded)Provide length protruding from mold)					

CUSTOMER IS RESPONSIBLE FOR PROPER SET UP OF 24V AC SWITCHES ON ANY HYDRAULIC OR MOVING ACTIONS. TARGET PLASTICS IS NOT RESPONSIBLE FOR DAMAGES RESULTING FROM IMPROPERLY SET-UP OR MALFUNCTIONING SWITCHES.

HYD. CORE PULL SEQ.: (ie: OUT-After Mold Open / Ejector Forward - Ejector Return / IN-before Mold Close):

KNOCKOUT PATTERN (7" Center, 4"x 16", etc.)(Placement Vert/Horz/Both)					
MISC. INFO. (air poppets, hand-load inserts, etc.)					
USE OF SPRAY ACCEPTABLE		PROCESS SHEET NEEDED			
PRINT SUPPLIED TO TARGET		INSPECTION CRITERIA SUPPLIED			
DESCRIBE INSPECTION REQUIRED:(Vis/Dim)					
REASON FOR SAMPLING (Rev. Change, New Mold.)					
FORM COMPLETED BY				DATE	

THIS SECTION TO BE COMPLETED BY AUTHORIZED PERSON AT TARGET PLASTICS TECHNOLOGY:

SAMPLE APPROVED BY:				DATE	
TIME (HRS)		MACHINE#		NUMBER OF PARTS	
INSP. TIME		COMMENTS:			

PLEASE DO NOT MODIFY THIS FORM. ALL INFORMATION IS NEEDED FOR OUR RECORDS