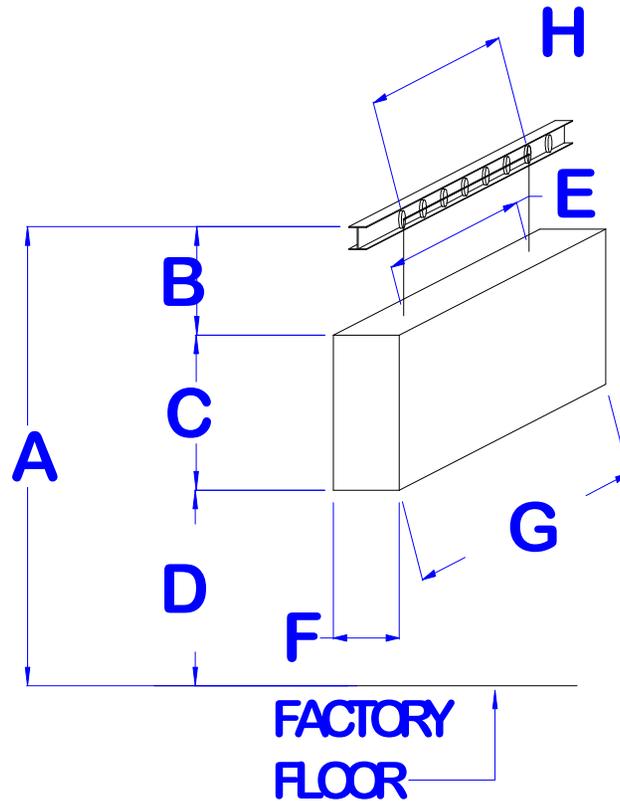


**Sample Part / Work Envelope Drawing:**



- A. TOP OF CONVEYOR TO FLOOR
- B. TOP OF CONVEYOR TO TOP OF PART
- C. PART HEIGHT
- D. BOTTOM OF PART TO FLOOR
- E. DISTANCE BETWEEN HANGING POINTS ON PART
- F. PART WIDTH
- G. PART LENGTH
- H. TROLLEY HANGING CENTERS

**DIMENSIONS IN INCHES**

A \_\_\_\_\_

B \_\_\_\_\_

C maximum \_\_\_\_\_ minimum \_\_\_\_\_

D \_\_\_\_\_

E \_\_\_\_\_

F maximum \_\_\_\_\_ minimum \_\_\_\_\_

G maximum \_\_\_\_\_ minimum \_\_\_\_\_

H \_\_\_\_\_

**NOTE: PLEASE PROVIDE MAXIMUM AND MINIMUM PART PROFILES AND ANY OTHER RELEVANT INFORMATION -**

Please complete and return this questionnaire along with any other relevant information including sketches, notes or suggestions. Should you not have information for any questions or details requested in this form, please feel free to contact us for clarification, or simply complete as much of the information requested as possible, and we will follow up on the items left unanswered.

Please be aware that this information sheet is designed to provide us with only a “rough” knowledge of your process and requirements. Additional information will be required as the initial design matures.

Please contact us at your convenience should you have any questions, concerns or if you require additional or more detailed information.

Thank you for this opportunity. We look forward to working with you and your company on this project.

Please return information to one of the following:

E-mail to: [curt@smithmachinery.com](mailto:curt@smithmachinery.com) or [steve@smithmachinery.com](mailto:steve@smithmachinery.com)

Finishing building direct Fax: (515) 233 - 4538  
Direct Phone: (515) 233 – 5161  
Mailing Address: 1287 W Ave. Ames, Iowa 50014

Sincerely,  
PRECISION FINISHING EQUIPMENT

*Steve Wilcoxon*

Steve Wilcoxon

**EQUIPMENT UNLOADING / HANDLING / POSITIONING:** (please check the appropriate box)

Is PFE to provide & arrange transportation services:  yes - no  unloading:  yes - no  rigging services:  yes - no

Is PFE to provide complete installation:  yes -  no Installation Supervision Only:  yes - no

If no engineering or other related services are required of PFE please check this box:

**Plant Space Available:** Please provide available "foot-print" equipment / system needs to be positioned within: Height \_\_\_\_\_ Width \_\_\_\_\_ Length \_\_\_\_\_

Is a drawing available of area equipment / system is to be positioned in?  yes - no  (if yes please provide copy along with return of this questionnaire)

Are there any height, width, length or positioning restrictions:  yes - no  (if yes, please describe in detail on a separate sheet)

**Unloading/Plant Access Door Opening:** \_\_\_\_\_' wide x \_\_\_\_\_' high. Is access door ground level  yes - no

Are there any obstructions between unloading area and location for final equipment placement:  yes - no  (if yes please describe on separate sheet)

Is proposed equipment all on one level:  yes - no  Is all equipment to be positioned on ground level:  yes - no

If answer to either question above is no, please provide detail of final equipment positioning on separate sheet –

Is approach to access door and unloading area: Concrete:  yes - no  Asphalt:  yes – no  Gravel:  yes - no

Is space available to pre-stage equipment prior to installation  yes - no  If space is available is it indoor  or outdoor (unprotected)

**Equipment Handling/Positioning:** (please provide the following if known)

**Work restrictions:** any height, width or length restrictions that may affect unloading or positioning of equipment:  yes - no   
(if yes to above, please describe in detail on a separate sheet)

**Crew Accommodations:** Are there local accommodations available for personnel i.e.: motels, restaurants, etc. within 15 miles of the facility:  yes - no

Is there a "local" airport available:  yes - no  if so, please provide the name of airport and location: \_\_\_\_\_

**Curing/Heating Schedule:** Time at Temperature: \_\_\_\_\_°F for: \_\_\_\_\_ minutes.

Work Temperature at entry to oven: \_\_\_\_\_°F Desired temperature at exit of oven: \_\_\_\_\_°F.

Part or Coating temperature restrictions:  yes none  If yes, provide description (on separate sheet) and temperature not to exceed: \_\_\_\_\_°F.

Is technical data sheet available detailing recommended cure cycle:  yes - no

**Product Cleaning:** If requesting a pretreatment system please provide the following: Batch  or In-Line , if In-line, total number of stages: \_\_\_\_\_.

Dwell time in each stage: \_\_\_\_\_ secs.1<sup>st</sup> \_\_\_\_\_ secs.2<sup>nd</sup> \_\_\_\_\_ secs.3<sup>rd</sup> \_\_\_\_\_ secs.4<sup>th</sup> \_\_\_\_\_ secs.5<sup>th</sup> \_\_\_\_\_ secs.6<sup>th</sup> \_\_\_\_\_ secs.7<sup>th</sup>

Identify Number of Heated Stages & Temperature for each heated stage: Stage # \_\_\_\_/temp\_\_\_\_\_°F, Stage # \_\_\_\_/temp\_\_\_\_\_°F, Stage # \_\_\_\_/temp\_\_\_\_\_°F

Is any type of D.I. or R.O. Halo or final rinse required:  yes - no  If so, please provide details on separate sheet –

Is any post treatment required prior to allowing solution to drain:  yes - no  (if yes please provide details on a separate sheet)

Total Dissolved Solids (T.D.S.) in water supply: \_\_\_\_\_

Is Air Knife/Blow-Off requested at washer exit: yes  -  no

**Utilities:**

Electrical: \_\_\_\_\_ VAC, \_\_\_\_\_ phase, \_\_\_\_\_ Hz. (electrical demand will be provided in proposal)

Fuel:  Natural Gas or  LPG, at \_\_\_\_\_ PSI or in \_\_\_\_\_ “ W.C. (fuel demand will be provided in proposal)

Compressed Air Supply Available: \_\_\_\_\_ SCFM @ \_\_\_\_\_ PSI. (air demand will be provided in proposal)

Is a Refrigerated Air Dryer available as a dedicated air supply to powder booth and powder delivery equipment?  yes - no

A sample part / conveyor information drawing has been attached, please complete and return with other information requested -

**DESIGN DATA:** (please check appropriate box)

**Material Handling:** Is conveyor to be ceiling  or floor  supported What is the desired process / line speed: \_\_\_\_\_ FPM

(Check all that apply)

Is variable speed control desired for conveyor drive:  yes or no  if yes what is minimum speed \_\_\_\_ FPM - maximum speed \_\_\_\_ FPM

Is conveyor to be Power & Free:  Overhead Monorail:  Chain On-Edge:  Spindle:  Flat Line:  In-Floor

Floor / Track Mounted Cart  Other

- if other, please provide additional detail and notes on separate sheet -

**Description of parts:**  mild steel (if mild steel, hot rolled  or cold rolled ) is scale or rust present on metal to be coated:  yes / no

(Check all that apply)

stainless steel  aluminum  other (if other please describe on a separate sheet)

Maximum part weight: \_\_\_\_\_ lb. Minimum part weight: \_\_\_\_\_ lb. Minimum part thickness: \_\_\_\_\_ " Maximum part thickness: \_\_\_\_\_ "

**Coating information:**  Liquid (is coating solvent base  or water base ) is coating air-dry  or force dry

(Check all that apply)

Powder (attach Technical Data Sheet and other relevant data for both liquid and powder coatings as well as adhesive)

Adhesive  Other (if other, please describe on separate sheet)

Total Number of different colors: \_\_\_\_\_ Frequency of color change: every \_\_\_\_\_ minutes \_\_\_\_\_ hours,

Please provide gallons / pounds sprayed per hour and % of total production for individual colors (attach on separate document)

Identify colors to be recovered: \_\_\_\_\_

Identify colors to be "spray to waste": \_\_\_\_\_

Do you want any type of parts recognition / automatic gun firing control system:  yes - no

Vibratory Sieve:  yes - no  Rotary Sieve:  yes - no  Automatic gun movers:  yes - no

Application equipment:  yes - no

# REQUEST FOR PROPOSAL



A Division of Smith Machinery Company

PLEASE COMPLETE ATTACHED FORMS AND RETURN TO PRECISION FINISHING  
DEPENDING UPON EQUIPMENT ADDITIONAL INFORMATION FORMS MAY BE REQUIRED

Finishing Equipment Division Office, Manufacturing & Test Center: 330 Main Street - Gilbert, IA. 50105 Office Phone: (515) 233-5161 Fax: (515) 233-4538

GENERAL INFORMATION: Date of request: \_\_\_\_\_ Person requesting proposal: \_\_\_\_\_

Title: \_\_\_\_\_ Contact Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ e-mail: \_\_\_\_\_

Company name: \_\_\_\_\_ Street: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip Code: \_\_\_\_\_

- REQUEST FOR PROPOSAL: (Check all that apply)
- |   |  |                                       |  |
|---|--|---------------------------------------|--|
| <input type="checkbox"/> WASHER             | <input type="checkbox"/> DRY-OFF OVEN      | <input type="checkbox"/> POWDER BOOTH | <input type="checkbox"/> CONVEYOR            |
| <input type="checkbox"/> LIQUID SPRAY BOOTH | <input type="checkbox"/> COOL DOWN CHAMBER | <input type="checkbox"/> BATCH OVEN   | <input type="checkbox"/> IN-LINE CURE OVEN   |
| <input type="checkbox"/> ENVIRONMENTAL ROOM | <input type="checkbox"/> COMPLETE SYSTEM   | <input type="checkbox"/> BLAST ROOM   | <input type="checkbox"/> IN-LINE WHEEL BLAST |
| <input type="checkbox"/> PAINT KITCHEN      | <input type="checkbox"/> BURN OFF OVEN     | <input type="checkbox"/> OTHER        |  |

Please provide description if response was other: \_\_\_\_\_  
(Please attach any additional information sheets / dwgs. that would aid in design)

Do you have written specifications for your equipment requirements:  YES - NO

If no to above, do you have any data, other specifications and or drawings for our engineering dept. to quote from?  YES - NO

Does your company require our engineering assistance for this project:  YES - NO

Proposal Type:  Budgetary Only  Firm Investment Figure Include Rigging/Freight: YES  - NO  Include Turnkey Installation:  YES - NO

If installation is to be performed by others do you require: Installation supervision:  YES - NO  Start-Up Assistance and/or Training:  YES - NO

Response required:  Verbal  Written Informal  Formal Proposal Requested date of return for information/proposal: \_\_\_\_\_

Is there an estimated completion / start-up date established for proposed equipment / system:  YES - NO  If so please provide date: \_\_\_\_\_

Is a conceptual drawing required with proposal:  YES - NO

(If yes to above, depending upon the level of detail required there may be engineering costs associated with providing prints / drawings)