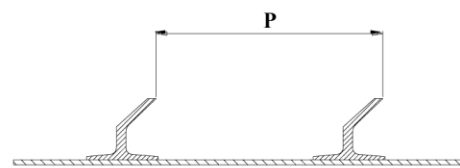
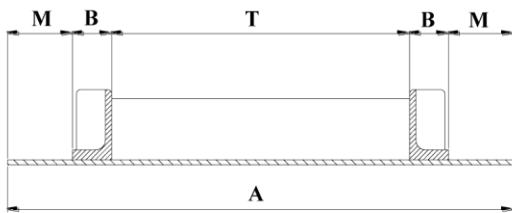


## Questionnaire for Sidewall Replacement belt

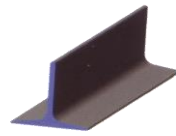
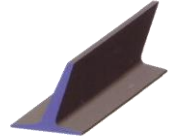


BASIC INFORMATION	
<b>Company</b>	
<b>Type</b> <input type="checkbox"/> User <input type="checkbox"/> OEM / Eng. <input type="checkbox"/> Agent <input type="checkbox"/> Consultant	
<b>Contact Person</b>	
<b>Phone</b>	<b>Email</b>
<b>Fax</b>	<b>Date</b>



CROSS SECTION				
<b>A</b>	<b>B</b>	<b>T</b>	<b>M</b>	<b>P</b>
mm	mm	mm	mm	mm

Please fill out the form, save as word or pdf file and send back to us.

RELATED DATA	
<b>Belt width</b>	mm
<b>Tensile strength</b>	N/mm
<b>Base belt quality</b>	<input type="checkbox"/> abrasion resistant <input type="checkbox"/> oil- and fat resistant <input type="checkbox"/> heat resistant up to 150° <input type="checkbox"/> flame retardant
<b>Sidewall height</b>	mm
<b>Cleat height</b>	mm
<b>Belt length</b>	m
<input type="checkbox"/> open <input type="checkbox"/> endless	

CLEAT TYPE	
<input type="checkbox"/> T	<input type="checkbox"/> C
	
<input type="checkbox"/> TC	<input type="checkbox"/> TCXF
	

NOTES

SCREW REINFORCEMENT	
<input type="checkbox"/> Yes	
<input type="checkbox"/> No	