



SPECIAL TAPS TEST APPLICATION DATA SHEET

Be sure to include pertinent comments, blueprints or sketches.

NATool Rep.: _____
 Customer Name: _____ Date: ____ / ____ / ____
 City/State/Zip: _____ Distributor: _____
 Phone: _____ Fax: _____ E-Mail: _____
 Contact: _____ Title: _____ Extn.: _____

GENERAL INFORMATION

(Application) B/P or Job # _____
 Tool Description _____
 Tap Style _____ Class of Fit _____ H-Limit _____ Thread Form _____
 Surface Treatment _____ Cutting/Forming _____ Blind/Thru Hole _____
 Hole Depth _____ Thread Length _____ Tap Drill Size _____ % of Thread _____
 Machine Tool _____ Condition _____ Horiz./Vert. _____
 Coolant _____ Mix _____ Speed (SFM) _____ # Taps/Set-Up _____
 Holder: Tension/Compression _____ Rigid Collet _____ Floating _____
 Material _____ Hardness _____ Characteristics _____
 Feed: CNC control NC control Synchronous Spindle Manual
 Cam Followed Lead Screw
 Unique job details: _____

COMPETITIVE BRAND:

Name _____ Tool Description _____
 Current Performance _____ # Holes/Tap _____
 Competitive Price (\$) _____ Est. Annual Usage _____
 Comments _____

RECOMMENDATIONS:

Tap Style _____ H-Limit _____ Surface Treatment _____ Speed (SFM) _____
 Tap/Drill Size _____ Coolant _____ Comments _____

TEST EVALUATION

NATool P.O. # _____ Dist. P.O. # _____ # Holes Tapped _____
 Quality of Thread _____ Gaging O.K. _____ On-Hand for Test _____
 Comments _____



Fill-out and fax to: 800-872-3299 or 815-389-2952 or send to:
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 E-Mail: sales@natool.com