

CNC VACUUM CLAMPING ENQUIRY FORM

**WE STRIVE TO PROVIDE
YOU WITH THE BEST PRICE &
PRODUCT POSSIBLE**

ONLINE FORM OR
PDF DOWNLOAD AVAILABLE AT
VACUUMCLAMPINGAUSTRALIA.COM.AU

MACHINE INFORMATION:

Machine Brand: _____

Machine Model: _____

Block Length: _____

Block Orientation: Lengthwise Crosswise

Block Width: _____

Quantity Required: _____

Block Height: _____

Vacuum Lines: One Two

Clamping Type: Pod & Rail Flatbed Grid Table

Flatbed Pitch of Slots: _____

ITEMS REQUIRED: Complete Block and Pads Top Pads Only Bottom Pads Only

PART NUMBERS (IF KNOWN)

Part Number:

Quantity:

Current Price Paid:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Tick this box if you require one of our staff to call you to discuss your requirements

CUSTOMER INFORMATION:

Business Name: _____

Email Address: _____

Contact Name: _____

Mobile: _____

Business Address: _____



**THANK YOU FOR YOUR ENQUIRY! WE WILL GET BACK TO
YOU SHORTLY WITH THE BEST QUOTE FOR YOUR NEEDS**

**EMAIL COMPLETED FORM BACK TO
ENQUIRIES@SOLUTIONSAUST.COM.AU**

