



Use this handy form to fill in pertinent information concerning your company and the sample part to be electropolished. Attach your card and mail your sample part.

Part Information

Part #: _____

Description: _____

Material: _____

Last Mfg. Operation: _____

Special Tolerances?

Yes ___ No ___ If yes, please include a print outlining critical areas.

Need A Quote? Yes ___ No, not at present ___

If yes, please indicate:

Lot Sizes: _____

Annual Volume: _____

Please describe the metal surface problem and what your present solution is:

Please describe which specific surfaces are most critical to electropolish:

Drop the sample part(s) and this form in a box and mail to:

Able Electropolishing Co., Inc.

2001 South Kilbourn Ave

Chicago, IL 60623-2390

888-868-2900

Please attach your business card or fill in info:

Company Name: _____

Address: _____

City: _____ State: ___ Zip: _____

ContactName: _____

Title: _____

Telephone: _____ Fax: _____

Email: _____