



Information needed for SHARK-FIN GRID-CAP BUDGETARY REQUEST

Company Information:

Today's Date: _____
Requested by: _____
Your Title: _____
Mill name: _____
Mill address: _____
Mill City: _____
Mill State/Province: _____
Mill Zip/Postal code: _____
Contact Phone: _____
Contact Fax: _____
Contact Email: _____

Drum Information:

Type of Drum: _____
Type of backing wire in use: _____
Size of drum: _____
Number of grids: _____
Thickness of grids: _____
Center to center distance of grids: _____
Type of Doctor system: _____

Other helpful information (if available):

Type of stock: _____
Inlet consistency: _____
Outlet consistency: _____
Stage of drum: _____
Vacuum: _____
Gravity: _____

Print this form using your browser's print button and return to:

Sharkey Machine Service

FAX: (706) 885-9040
1010 Longley Place
LaGrange, GA 30240

More Questions?

Call Us at:
(706) 885-0905