Westar Plastics RFQ Form

| RFQ#: | RFQ Deadline: | | |
|-----------------------|---------------|--------------------|--|
| Part Number: | | | |
| Part Description: | | | |
| Estimated Annual Volu | me: | FOB: | |
| Material: | | | |
| Color: | Specif | fication Required: | |
| Part Weight: lbs | | grams | |
| Part Volume inches cu | bed: | | |
| Print supplied: | Yes | No | |
| CAD Data supplied: | Yes | No | |
| Tooling: | New | Exisiting | |

| Tooling Size (If Exisiting) L x \ | V x H | |
|--|---|-------------------|
| Cavitation: | Hot Runner: | Yes |
| | If Hot Runner Type of Conne Number of Zones: _ | |
| Components Required: | Yes | No |
| Components: **If purchased by Molder, we will need complete Recommended Supplier: | | |
| Packaging Requirement: | Bulk | Special Packaging |
| Special Pack Instruction: | | |
| Additional Comments: | | |