

TEST DATA REPORT

Please fax the completed form to **01+ 586 558-9481**

Client Information

Country: _____
 Client / End User: _____ City: _____
 Distributor: _____ State / Province: _____
 Phone: _____ Mail Code: _____
 Date: _____ Rep: _____

Application Data

Hole Dia: _____ Depth Of Cut: _____
 Required Hole Tolerance: _____ Req. Hole RMS Finish: _____
 "Blind" Hole "Through" Hole

Machine Tool Type

CNC Matching Center Gantry Lathe
 Multi-Spindle Drill Head Transfer Line Other
 If Other, Explain: _____

Machine Builder:

Model: _____
 Horsepower: _____ Per Machine: _____ Per Spindle: _____ Per Drill Head: _____

Spindle Position	Feed Mechanism	Coolant Application	Coolant Flow Rate
<input type="checkbox"/> Vertical <input type="checkbox"/> Horizontal <input type="checkbox"/> "Bottom Up" <input type="checkbox"/> Other _____	<input type="checkbox"/> Ball Screw <input type="checkbox"/> Mechanical <input type="checkbox"/> Hydraulic <input type="checkbox"/> Pneumatic	<input type="checkbox"/> Thru-Spindle <input type="checkbox"/> Thru Tool <input type="checkbox"/> Flood	PSI _____ GPM _____

Coolant Type	Work Piece Condition
<input type="checkbox"/> Dry <input type="checkbox"/> Water Soluble <input type="checkbox"/> Cutting Oil <input type="checkbox"/> Other _____	<input type="checkbox"/> Casting <input type="checkbox"/> Stacked <input type="checkbox"/> Cold-Rolled <input type="checkbox"/> Plate <input type="checkbox"/> Round <input type="checkbox"/> Forging <input type="checkbox"/> Hot-Rolled

Current Tool History

Manufacturer: _____

Tool Grade	Drill Type	Coatings
<input type="checkbox"/> H.S.S. <input type="checkbox"/> Carbide <input type="checkbox"/> Other _____	<input type="checkbox"/> Solid <input type="checkbox"/> Indexable <input type="checkbox"/> Brazed <input type="checkbox"/> "Spade-Tipped"	<input type="checkbox"/> Uncoated <input type="checkbox"/> TiN <input type="checkbox"/> TiAN <input type="checkbox"/> TiCN <input type="checkbox"/> Other _____

Current Speed: RPM: _____ SPM: _____ M / Min: _____

Current Feed: IPR: _____ IPM: _____ mm/Rev: _____ mm / Min: _____

Average Number Of Holes Drilled: _____ Per Tool: _____ Per Edge: _____ Per Grind: _____

Average Re-Grind Per Tool: _____ Common Failure Mode: _____

Indexa-V Drill Combination Suggested In Tool Test:

Insert Style: _____ Drill Body Number: _____

Test Results:	1) RPM: _____ Feed: _____ Piece Results: _____
	2) RPM: _____ Feed: _____ Piece Results: _____
	3) RPM: _____ Feed: _____ Piece Results: _____

Comments: