COMPOSITE APPLICATION QUESTIONNAIRE

Company:		Phone Numbe	er:		
Contact Name:	Email or Fax:				
Address:					
Industry:					
PART A: APPLICATION					
What is the application:	Composite Repair	Metal Bond	Vacuum Bonding	Vacuum Molding	
(Check all that apply?)	Ply Compaction	Ply Debulking	Hot Drape Forming		
	Other, please expla	ain:			
Object that needs heat:					
Dimension of object:	(Please include a drawing o	r sketch)			
Length:	Width:	Height/1	Thickness:		
Preferred UOM: Inch					
Composite Material Type	? (Carbon epoxy, fiberglas	s polyester, etc)			
Do you have a need to pr	ocess multiple parts at	t once? No	Yes, quantity?	_	
Unit of Measurement:	°C °F				
Ambient Temperature (Ei	nvironmental): Maxin	num:	° Minimum:	0	
Environment: (check all t	hat apply) Indoo	r Moisture	Chemical Clea	nroom Class:	
Other:					
Starting content/object	temperature:	0			
Ramp to:	within		Hour(s)		
Dwell:		own To:	° within		Hour(s)
Do you currently have a h		trolling device?:	No Yes, please expla max amperage:	ain model and	
Would you like BriskHeat	to recommend a hot b	onder or other con		o Yes	
PART B: POWER REQUII	REMENTS				
Voltage: 200 VAC	208 VAC 2	240 VAC 277	VAC 480 VAC		
Frequency: 50-60Hz	Other (please	specify):			
Maximum Amperage Ava	ilable:				
PART C: ADDITIONAL IN					
PART C: ADDITIONAL IN Additional comments ab	out the application:			end.)	

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