

**EWALD**

Instruments Corp.

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## **WELDER REQUIREMENTS**

Company/Contact

Date: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Part #1: Mat. and/or Dwg #  
Thickness \_\_\_\_\_

Part #2: Mat. and/or Dwg #  
Thickness \_\_\_\_\_

Type of weld: Tee\_\_\_\_; Lap\_\_\_\_; Butt;\_\_\_\_ Other:

Weld Requirement: # per Hour\_\_\_\_; Day\_\_\_\_; week\_\_\_\_; month\_\_\_\_; or  
year\_\_\_\_\_

**NOTE:** We are primarily interested in materials and thicknesses however, other constraints such as pull strength may affect our considerations. Please mention any factors that may apply.

Customer Remarks: