



Date _____

1. Is this requirement for a new or a replacement caster?
 - a. If for replacement, what brand/model of caster is the customer currently using?

Brand _____	Model# _____
b. If unknown: Wheel type _____	Wheel size _____
Top Plate Size _____	Bolt Centers _____
	Height _____
 - b. If unknown: _____
2. How many casters/wheels are needed per piece of equipment?

Swivels _____	Rigids _____	Wheels only _____
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3. How much capacity per caster/wheel is required _____ lbs.
4. How will the load be applied?
 - a. Suddenly (Shock loaded-Timed cycle)
 - b. Gradually
 - c. Both a & b
5. What type of floor(s) will caster/wheel operate on:
 - a. Wooden
 - b. Concrete
 - c. Tile
 - d. Asphalt
 - e. Carpet
 - f. Other _____
6. What are floor conditions?
 - a. Smooth
 - b. Uneven
 - c. Obstructions

If so, what types? _____
7. Is noise a factor? Yes No
8. Are any unusual environmental conditions present?
 - a. Temperature - high or low, approximate degrees _____
 - b. Chemicals - what kind and how will caster be exposed _____
 - c. Water/steam-temperature? _____ Submersion? _____ Length of exposure? _____
 - d. Dirt Sand Grease Oil
 - e. Other environmental conditions? _____
9. How will conveyance (equipment) be moved?
 - a. Manual
 - b. Towed

If towed, how fast? _____ how often? _____ Other _____
10. Are there any other requirements? _____

Your Name _____
 Co. Name _____
 Address _____
 City _____
 State _____ Zip _____
 Phone _____
 Fax _____
 EMAIL _____

*Still need help?
Call or Fax*



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