



Technical Questionnaire

Carbon Bearings

Date: _____

Company: _____ Contact Person: _____

_____ E-mail: _____

City/State: _____ Phone: _____ Fax: _____

I. Application/System: _____ **Industry:** _____

Manufacturer:

User:

Service/Maintenance:

II. Running conditions

1. Dry Running: Wet Running: Mixed Friction:

2. Medium: _____ Abrasives: _____

3. Working Temperature [°C]: _____

4. Rotation Speed [R/min.]: _____ or Sliding Speed: _____

5. Continuous Running: Intermittent Running:

6. Mating Material: _____

Surface Condition, Roughness: _____

Hardness: _____

III. Design

1. Kind of Bearing: Thrust Bearing: Radial Bearing: Flanged Bearing:

2. Dimensions [mm]: OD: _____ ID: _____ Length: _____

3. Axial Load: _____

4. Radial Load: _____

5. OD Shaft, Tolerance: _____

6. Housing Material: _____

7. Description of fixing type: _____

8. Housing Bore, Tolerance: _____

IV. General Questions

1. Approvals required, Quality specs.: _____

2. Grade hitherto used: _____

Motivation for an alternative grade: _____ or New Project:

3. Quantity per system: _____

Yearly demand: _____

4. Data required: _____

5. Action required: Advice: Offer: Preparation of samples:

Please add dwgs. Or sketches. Thanks in advance.

Please send this questionnaire to: +49 (0) 641 608 28 1706 or per Email: SSE@schunk-group.com