

Schaefer Brush



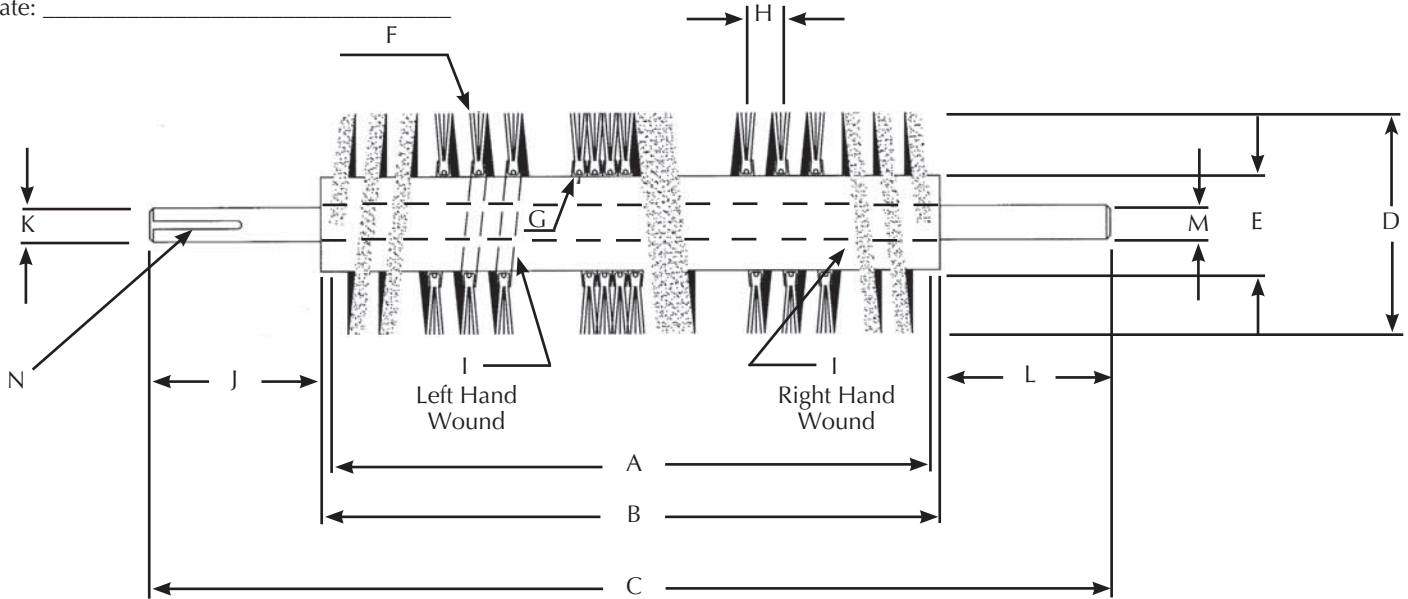
Custom Cylinder Brush Form: Wound on Core with Shaft Section 15-2

Name: _____ Company: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Date: _____



Brush Application: _____

A. Brush Length: _____

B. Core Length: _____

C. Overall Length: _____

D. Brush Diameter: _____

E. Core Diameter: _____

F. Brush Filament:

1. Type:

- | | |
|--|---|
| <input type="checkbox"/> Nylon | <input type="checkbox"/> Brass |
| <input type="checkbox"/> Polypropylene | <input type="checkbox"/> Phosphorous Bronze |
| <input type="checkbox"/> Polyester | <input type="checkbox"/> Stainless Steel |
| <input type="checkbox"/> Tampico | <input type="checkbox"/> Carbon Steel |
| <input type="checkbox"/> Horse Hair | <input type="checkbox"/> Other: _____ |

2. Fill Diameter: _____

3. Level or Crimped: _____

4. Color Preference: _____

G. Brush Channel Size:

- #7 W= .320" H= .340"
 #4 W= .194" H= .196"
 #3 W= .143" H= .158"

H. Lead or Pitch: _____

I. Left or Right Hand Wound: _____

J. Shaft Extension (left side): _____

K. Shaft Diameter (left side): _____

L. Shaft Extension (right side): _____

M. Shaft Diameter (right side): _____

N. Keyway:

1. Length: _____

2. Width: _____

3. Depth: _____

O. Core Material:

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Aluminum | <input type="checkbox"/> Steel |
| <input type="checkbox"/> Stainless Steel | <input type="checkbox"/> Other: _____ |

P. Shaft Material:

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> Aluminum | <input type="checkbox"/> Steel |
| <input type="checkbox"/> Stainless Steel | <input type="checkbox"/> Other: _____ |

Q. I'm not sure what I want, have someone contact me!

Contact Me!

**Fill out and Fax to Schaefer Brush
262-547-3927!**

