



AnC Precision
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Tube Information Form

Dear Customer:

Please fill out this form to your best ability and send it along with the tubes that are being tested. If you do not know the answers we will figure it out or you call and we will help you.

Customer Information:

Customer Name: _____

Customer Company: _____

Date: _____

Address: _____

Phone Number: _____

Email: _____

Tube Lot number: (for your records): _____

Tube Information:

Tube Diameter: _____

Tube Length: _____

Tube Material: _____

Tube number of layers: _____

Production Equipment:

Type of Production Equipment (Name of Manufacturer): _____

Model number of Production machine: _____

Hot Air Nozzle Diameter: _____

Cooling Ring ID: _____

What Sealing Temperature: _____

What Jaw Gap Setting: _____

List any failures or problems: _____