

Items marked with an asterisk (\*) must be completed to initiate a design request. L-2214

## Schroeder Product Development/Modification Request Form

Submitted by:	Project Number:
Submitted to: Paulal Belanger	Date Received:
*Distributor:	*Customer:
*Office:	
*Salesman:	
*Phone:	Phone:

**Product Description** - Include customer's desired end result, dimensions and/or size limitations, special mounting or installation requirements, and all possible details. Attach sketch or separate page if needed.

PSI MaxPSI	*Cyclic Pressure:PSI
*Flow (gpm):	*Viscosity at operating temp. (SSU):
Fluid:	Medium (or micron rating):
*Press <u>ure: Min.</u>	Bypass Setting (PSI):
Seals:	
*Quantity, first order:	*Annual usage:
Quote in quantities of:	Competitors price:
*Target Price to customer:	Competitors Model #:
Abort if price is above:	Probability of getting business at target:%

## \*\*Customer has not gotten pricing at this time

Date Requested By Customer:	To Be Completed By Schroeder:
Drawing:	Cost Objective:
Price:	Cost Data Required By:
Prototype:	Engineering target date:
	Formal Eng. Estimate Required:
	Budgetary Eng. Estimate Required:

Marketing Coordinator:

## Approved by:

An ISO 9001:2008 Certified Company