



Project Form

Company: _____
 Name: _____ Title: _____
 Address: _____
 Phone: _____ Fax: _____
 Email: _____ Date: _____

Extrusion Type:

Single Lumen : _____	Striped: _____	Wire Coat: _____	Profile _____
Multi Lumen: _____	Solid Rod(Beading) _____	Bump/Tapered _____	Other _____
Co-Extrusion _____	Coil/Braided: _____	Longitudinal Wires _____	_____

Material:

Grade: _____	Hardness: _____	Filler: _____	
Manufacturer: _____	Color: _____	Barium Sulfate: _____	Bismuth: _____
Opacity: _____		Tungsten: _____	Other: _____

Dimensions:	Tolerances:	Length:	Drawing Attached:
OD - _____	OD - +/- _____	Cut - _____	Yes _____
ID - _____	ID - +/- _____	Spoiled - _____	No _____
Wall- _____	Wall - +/- _____		

Sketch: