

For internal use only

Salesforce Opportunity

APPLICATION EVALUATION REQUEST LASER MARKING

Application Number

Please send samples attn: Applications Lab

Date Received

	End Product Made:	Industry:		
	Sales Rep:	Regional Manager:		
Return Samples to:	Rep Cust			
Contact Information				
Name:				
Title:				
Company:				
Company.				
Address:				
Mobile phone:				
Office phone:				
Office priorie.				
Email:				

M	Material Information					
Ple	Please be as descriptive as possible and send at least 10 parts for evaluation.					
#	Part Name and/or description	Material (e.g. – AL6061, SS304, orABS)	Plating			
1						
2						
2						
3						



AMADA WELD TECH INC. _____

_	Mark Information Please provide artwork (DXF or other format) when appropriate.					
#	What to mark (e.g. Text, 2D Matrix, graphic) If barcode, please provide string to encode.)	Type of mark (e.g. anneal, ablate, etch, engrave)	Mark Size or font height	Target mark time(seconds)		
1						
2						
3						

Additional Mark Information Please provide any pertinent information regarding the mark.		
Will the part be nested? What size will the nest be?		
For 1D and 2D codes, what model of barcode scanner do you have?		
Further information:		



AMADA WELD TECH INC. _____

Project Information		
What is your current marking process?		
Why are you looking for a new marker? (Is your current system too slow?not enough contrast? Other?)		
Are you looking for a marker only or a complete system?		
Are you looking to automate the process?		
Timeline of project?		
What is the budget for this project?		