

The more we know about your requirements,
the more precisely will be our solution.

Your contact

Name:	_____	Phone:	_____
Company:	_____	Mobile:	_____
Zip code, City:	_____	Fax:	_____
Street, no.:	_____	E-Mail:	_____

Do you already have some experience with VFFS timing belts from Esband?

No, please contact us

Yes, we were in contact with your company on _____

Machine data and OEM information:

OEM/type: _____

OEM part number timing belt: _____

Your requirements regarding the application:

contact surface: paper foil
specification: _____

abrasion resistance: low medium high

coefficient of friction: low medium
 high very high

miscellaneous: FDA resistance to oil / lipids
 use of water

Your requirements regarding VFFS timing belt:

profile: T5 T10 other profile: _____

length: _____ mm/alternative number of teeth: _____

width: _____ mm

coating: NK (natural rubber) PU
 PU + SI-ply SI 50

total thickness: _____ mm

coating thickness: _____ mm

surface treatment: ground untreated

design: right left
 straight round

further comments: _____

Please send the completed form to:

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GERMANY Phone +49 (0)7324 15-0, Fax +49 (0)7324 15-280, info@esband.de

