QUOTATION FOR NON CATALOG PRODUCT





(MINIMUM ORDER QUANTITIES MAY APPLY)

DISTRIBUTOR: CONTACT:
ADDRESS:
INITIAL ORDER QTY:PHONE:FAX:
CUSTOMER SIGNATURE (REQ'D): PRINT NAME:
AMT/IPT MODEL:COMPETITOR/OTHER:**
MODIFICATION REQUESTS:
**(PLEASE FAX ADDT'L SPEC SHEETS OR INFORMATION FOR ABOVE, IF APPLICABLE)
LIQUID(S):PCT% SOLIDS/ABRASIVES?YESNO
PCT%
PCT% SIZE
TEMPERATURE (F°/C°) AMBIENT TEMPERATURE (F°/C°) ENCLOSEDYESNO
FLAMMABLE? YES NO LIQUID SPECIFIC GRAVITY (WATER = 1.0)
PERFORMANCE:
FLOW:(GPM) DISCHARGE HEAD:(FT/PSI) SELF-PRIMING REQ'DYESN
DISCHARGE NOZZLE REQUIREMENTGPM @ PSI SUCTION LIFT (VERTICAL)FEET
APPLICATION DESCRIPTION:
ALL REQUESTS MUST BE RECEIVED
VIA FAX (610) 948-5300 OR EMAIL sales@amtpump.com
PHONE REQUESTS WILL NOT BE TAKEN WITHOUT ABOVE FORM BEING FILLED OUT
APPROVAL FOR QUOTATION (AMT AUTHORIZED SIGNATURE):
DATE: PRINT NAME:

PUMP KIT LIMITED WARRANTY APPLIES TO NON-CATALOG PRODUCT and are warranted against defects in material and workmanship for 60 days from the date of shipment. NON-CATALOG PRODUCT are non returnable for credit and non cancelable from purchase order issue date.

Standard AMT Terms and Warranty can be reference at http://www.amtpump.com/products/PDF/warranty.pdf