

PROCESSING INQUIRY			DATE:	REFERENCE:
CUSTOMER INFORMATION			MACHINE INFORMATION	
Company:			Manufacturer:	
Address:			Model & SN:	
City/State:			Clamp Force:	
Contact:			Capacity (ozs):	
Phone/Fax:			Diameter & L/D:	
Email:			Maximum Stroke:	
PROCESSING INFORMATION				
Material:	Heat Profile: Rear -	Aim Melt Temperature:		
Additives: % Re grind:	Middle -	Actual Melt Temperature:		
Colorant:	Front -	Screw Motor Hydraulic Pressure:		
Melt Index: Density:	Nozzle -	Residence Time:		
Cycle Time: Recovery:	Screw RPM:			
Shot Size (oz./g):	Back Pressure:	REILOY WESTLAND CORP USE		
SCREW DESIGN INFORMATION				
Mixer: Type -	Flight Depth: Feed -			
Location -	Meter -			
Barrier Type:	Compression Ratio:			
Flight Width: Feed - Meter -	Zone Length: Feed -			
Valve Mfgr:	Trans -			
Valve Type:	Meter -			
PROCESSING PROBLEM				