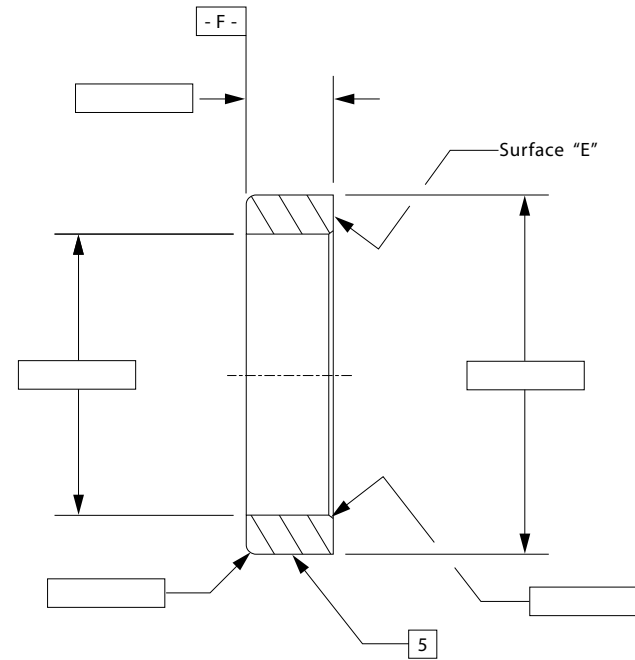
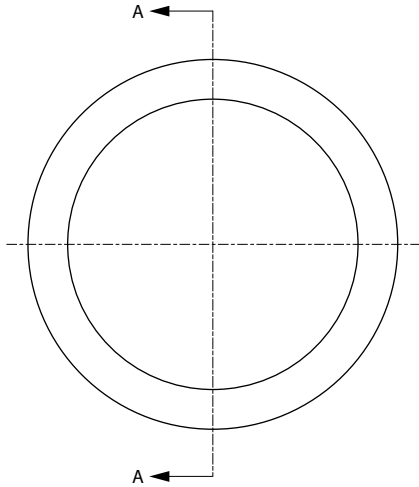




KPMI Custom Seat Order Form

Part Number:



Customer Information

Contact Name:	<input type="text"/>		
Company Name:	<input type="text"/>		
Phone:	<input type="text"/>	Date:	<input type="text"/>
Make:	<input type="text"/>	Model:	<input type="text"/>
Disp:	<input type="text"/>	Years:	<input type="text"/>

Customer Approval:	<input type="text"/>	Date:	<input type="text"/>
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Seat Information

Additional Notes:	<input type="text"/>		
KPMI Blank P/N:	<input type="text"/>		
Material:	SAE 630	G2 Cast Iron	
(KPMI use only) Total Cost Per Seat:	<input type="text"/>	Qty.	<input type="text"/>
(KPMI use only) Total Cost:	<input type="text"/>		

NOTES:

- | | |
|----------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| 1. Break and deburr all sharp edges 0.010" X 45° | 4. I.D. and O.D. must be concentric within 0.010" TIR |
| 2. Finish O.D. to RMS-16 parallel and round within 0.0004"
(For wall thickness less than 0.120", parallel and round within 0.0008") | 5. I.D. and O.D. must be parallel within 0.002" |
| 3. Surface "E" parallel to Datum F within 0.002" | 6. O.D. must be perpendicular to Datum F within 0.002" |
| | 7. (U.O.S.) Unless Otherwise Specified |