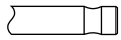
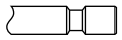

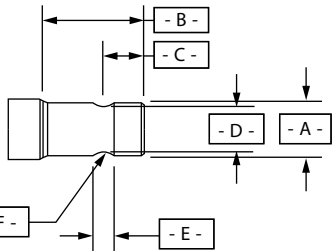
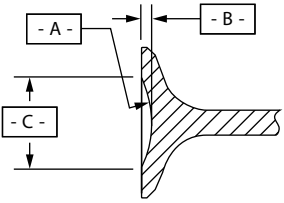
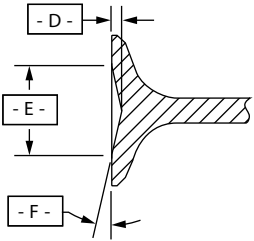
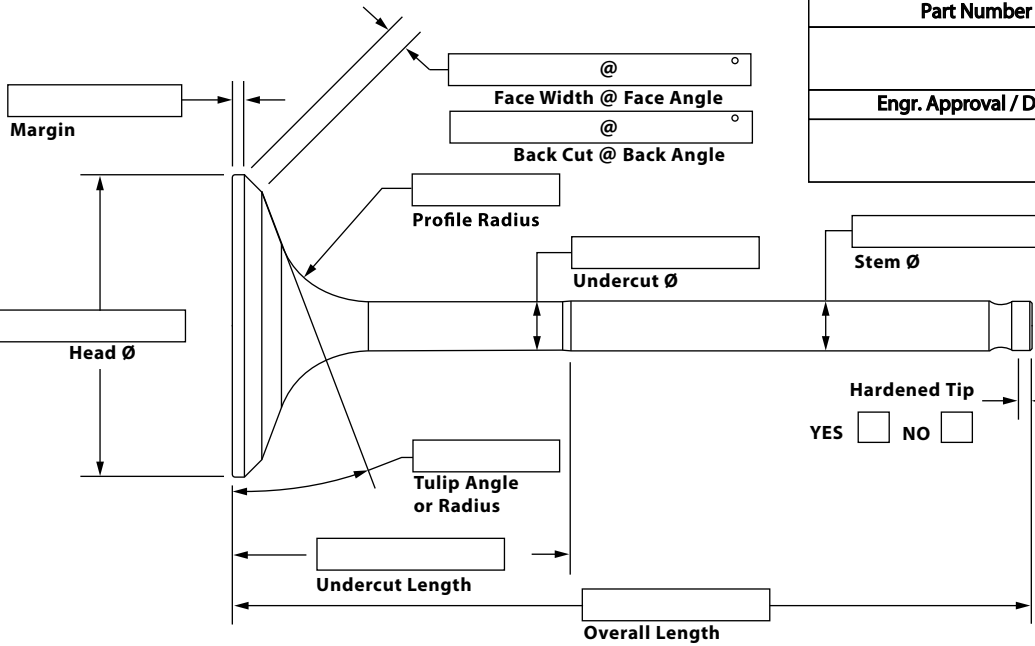
	Groove Dimensions		
			
	Radius Groove	Square Groove	Triple Groove
Groove Location:			
Groove Minor Ø:			
Groove Width:			
Groove Radius:		N/A	
Groove Spacing:	N/A	N/A	

Groove Location is measured from the tip of the valve to the center of the radius or to the top of the square groove (for the triple groove it is measured from the tip of the valve to the center of the middle radius)

Reduced Dia. Groove Detail (if applicable)	
-A- Undercut Ø:	
-B- Undercut Length:	
-C- Groove Location:	
-D- Groove Ø:	
-E- Groove Width: $E=2\sqrt{2F(A-D)-(A-D)^2}$	
-F- Groove Radius:	

Dish Dimensions			
			
Radius Dish		Angle Dish	
-A- Dish Radius:		-D- Dish Depth:	
-B- Dish Depth:		-E- Dish Width:	
-C- Dish Width:		-F- Dish Angle:	

KPMI® Custom Valve Order Form



Part Number
Engr. Approval / Date

<input type="checkbox"/> Hardened Tip YES <input type="checkbox"/> NO <input type="checkbox"/>

Customer Information			
Contact:			
Company:			
Phone:		Fax:	
E-Mail:		Date:	
Make:		Disp:	
Model:		Years:	
Material:	<input type="checkbox"/> S.S.	<input type="checkbox"/> TI.	<input type="checkbox"/> Other: _____
Blank Part #:			
Notes:			

Additional Specifications	
Rocker Arm	YES <input type="checkbox"/>
Rocker Arm (w/ Elephant Foot)	YES <input type="checkbox"/>
Cam Follower (Shim & Bucket)	YES <input type="checkbox"/>
Using Lash Cap	YES <input type="checkbox"/>
Intake Valve	YES <input type="checkbox"/>
Exhaust Valve	YES <input type="checkbox"/>

Customer Approval:	
Date:	