

# Anfrage-/Auftragsformular für Abstreifersysteme



Firma: .....

Firmenstempel: .....

Ansprechpartner: .....

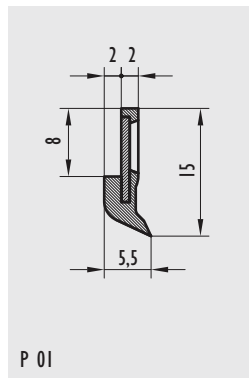
Telefon: ..... Telefax: .....

E-Mail: .....

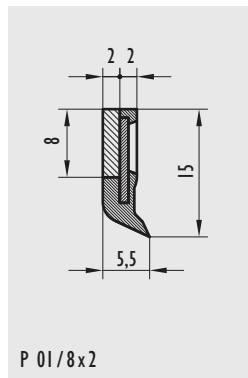
Stangenanzahl: ..... Stangenlänge: 500 mm  1.000 mm  ..... mm

Lieferdatum: ..... Datum: ..... Unterschrift: .....

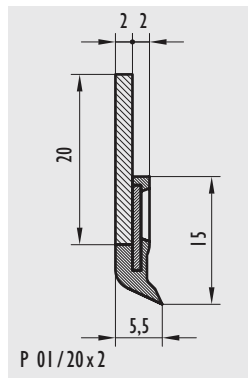
Abstreifertyp: Gleitbahn  Teleskop-Stahlabdeckung   
 Linearführungsbahn  Dichtungsabstreifer für hydrostatische Führungen



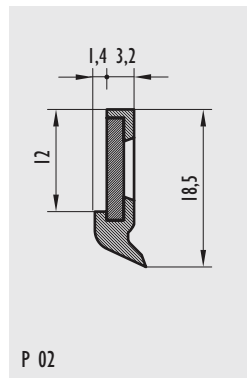
P 01



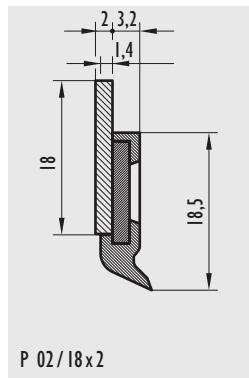
P 01 / 8 x 2



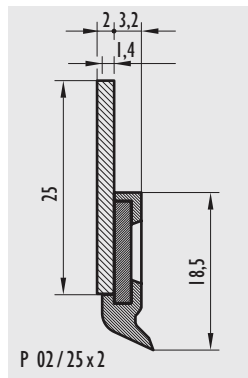
P 01 / 20 x 2



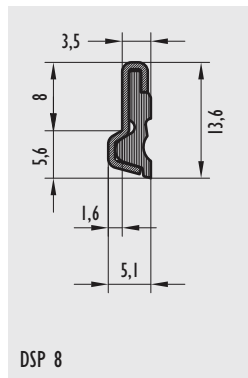
P 02



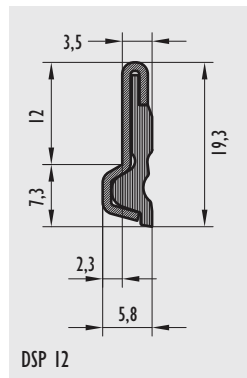
P 02 / 18 x 2



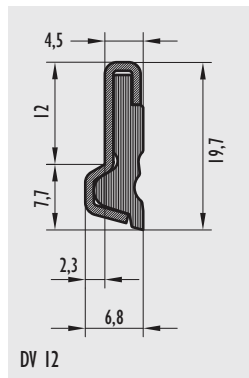
P 02 / 25 x 2



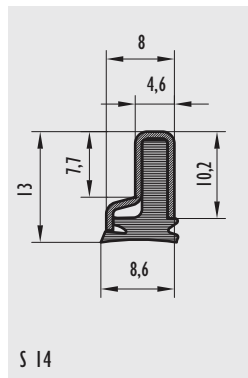
DSP 8



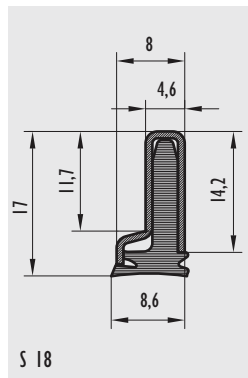
DSP 12



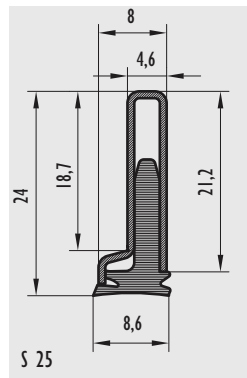
DV 12



S 14



S 18



S 25

Linearführung: Hersteller: ..... Größe: ..... Typ: .....

Einsatzbedingungen: .....