

Impact Service Corporation

CUSTOMER DATA SHEET

Customer: _____ **Phone :** _____
 _____ **Fax:** _____
 _____ **Contact:** _____
 _____ **Dealer:** _____

VSI Make: _____ **Motor HP/RPM:** _____
Model: _____ **DN Sheave:** _____
S/N : _____ **DR Sheave:** _____
Table: _____ **Table Speed:** _____

CAST WEAR PARTS LIST

Part Number	Description	Qty/Set	Unit Wt. (Lbs.)	Alloy
	Impeller Shoe			HC
	Backing Plate			MN
	Shoe Bracket Liner			MN
	Flat Table Liner			HC
	Feed Disc			HC
	Top Table Plate			CM
	Bolt Plate			CM
	Outer Table Liner			LC
	Bottom Flywheel Liner			HC
	Anvil			HC
	Anvil Ring Liner			LC
	Tub Liner			HC
	Lower Tub Liner			HC
	Upper Tub Liner			HC
	Inner Lid Liner			HC
	Inner Middle Lid Liner			HC
	Middle Lid Liner			HC
	Outer Middle Lid Liner			HC
	Outer Lid Liner			HC
	Outer Lid Liner			HC
	Lower Feed Tube			MN
	Upper Feed Tube			MN
	Feed Tube Extension			MN
	Pedestal Skirt Liner			HC
	Tunnel Liner			HC
	Splash Plate Liner			MN
	Pedestal Skirt Cone			HC
	Pedestal Bolt Guard			HC

APPLICATION INFORMATION

Feed Size: _____ **Product Desired:** _____
TPH Feed: _____ **Material Type:** _____
Shoe Life: _____ **Amp Draw:** _____

Comments: _____

Date Updated: _____ **By:** _____

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