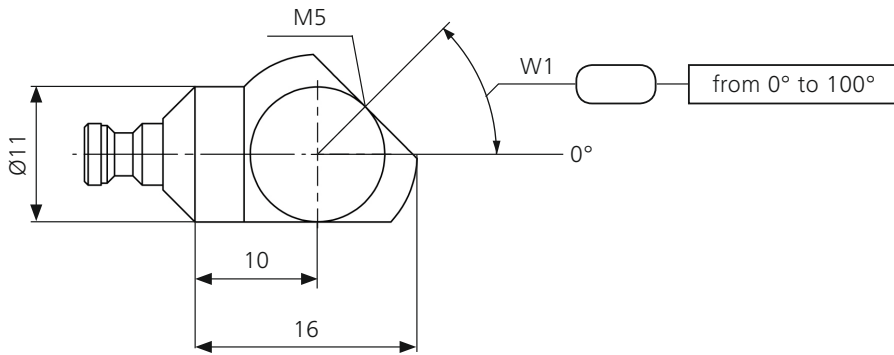


## Double angle and single angle with conical interface / inquiry

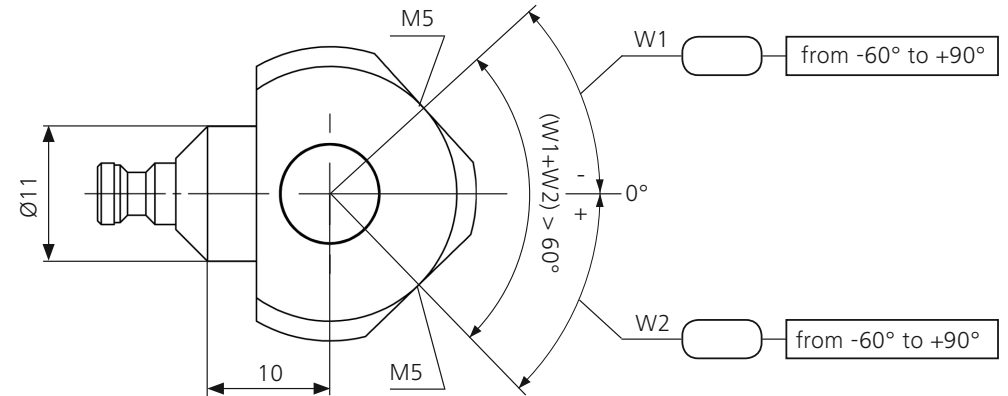
### Single angle

Quantity: \_\_\_\_\_



### Double angle

Quantity: \_\_\_\_\_



Company

Department

Name, First

Address

City / Zip

Phone

Fax

E-Mail

### Fax inquiry:

Please fill in the specifications into the right fields. Sign the desired quantity into the fields on the top of the page. Print the page.

Send the fax inquiry to:

**+49 7361 6336 29**



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