

FIELD ANALYSIS REPORT

THIS REPORT MUST BE COMPLETELY FILLED OUT



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_____ DRILLING APPLICATION

DATE: _____ SUBMITTED BY: _____

END USER	Company Name: _____	
	Company Address: _____ _____	
AGENT AND DISTRIBUTOR	Contact Name - Title: _____	
	Phone: _____	Fax: _____
	Distributor Name: _____	
	Distributor Address: _____ _____	
APPLICATION INFORMATION	Part / Assembly Description: _____	
	Material: _____ Condition: _____ Hardness: _____ Rc _____ BHN	
	Finish Required: _____	
	Other Requirements: _____	
	DRILLING DATA	
	Thickness: _____ Thru Hole: _____ Blind: _____	Angled Entry: _____ Curved Surface: _____
	Hole Dia.: _____ Tolerance: _____	Additional Comments: _____
	Depth of Cut: _____ Stack? _____	_____
	Interrupted Cut? _____ Describe: _____	_____
	_____	_____
Bushing Used? _____ Required Extra Length: _____	_____	
Gage Length: _____ Min: _____ Max: _____	_____	
Holes per Mo/Year: _____ Est Lot Size: _____	_____	
PRESET CONDITIONS	Tool: _____ Feed Rate: _____ RPM: _____	
	Cycle Time: _____ Tool Life: _____ Test Sample Avail.: <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Part Print Avail.? <input type="checkbox"/> Yes (enclosed) <input type="checkbox"/> No Process Dwg of Mach. and Fixture Available? <input type="checkbox"/> Yes (enclosed) <input type="checkbox"/> No	
	Current Problems: _____ _____	

