



**ALLIANCE**

**TUBULAR PRODUCTS**

# New Part Specification Form

2600 E. 5<sup>th</sup> Ave Gary, IN 46402

AllianceTubularProducts.Net

219 - 427 -5400

Date : \_\_\_\_\_

Customer Name : \_\_\_\_\_

Item Dimensions: W \_\_\_\_\_ x H \_\_\_\_\_

NOM Gauge (or min gauge): \_\_\_\_\_ Item Length: \_\_\_\_\_ Length Tolerance (+/-) : \_\_\_\_\_

ASTM	Specification	A36	A-513	A-500	
	For A-513	Type 1:	Type 2:	Substrate Grade (1008/1010 Unless Specified): _____	
	For A-500	Tubing Grade:	B	C	D

Substrate Type: HR: \_\_\_\_\_ HRPO: \_\_\_\_\_ CR: \_\_\_\_\_ ALUM: \_\_\_\_\_ GALV: \_\_\_\_\_ Coating Weight: \_\_\_\_\_

Stencil Required: Yes \_\_\_\_\_ No \_\_\_\_\_

Does the requirement need to be 100% made & melted?: Yes \_\_\_\_\_ No \_\_\_\_\_

Will this tube be galvanized?: Yes \_\_\_\_\_ No \_\_\_\_\_ Will this tube be bent?: Yes \_\_\_\_\_ No \_\_\_\_\_

Customer Part #: \_\_\_\_\_ Alliance Tubular Part # : \_\_\_\_\_

End Condition Requirements (Saw Cut Min Burr STD:) \_\_\_\_\_ Telescope?: Yes \_\_\_\_\_ No \_\_\_\_\_

End Use of the Part?: \_\_\_\_\_

BOLs/Certs Sent Electronically?: Yes \_\_\_\_\_ No \_\_\_\_\_ Email Address: \_\_\_\_\_

Special Instructions: \_\_\_\_\_

## Customer Information *(New Customers Only)*

Purchasing Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_ Ph#: \_\_\_\_\_

Delivery Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_ Ph#: \_\_\_\_\_

Delivery Address: \_\_\_\_\_

Max Bundle Lift Weight : \_\_\_\_\_ Max Bundle Dimensions: \_\_\_\_\_

Crane or Forklift Unload?: Crane: \_\_\_\_\_ Forklift: \_\_\_\_\_ If fork lift: Side Unload: \_\_\_\_\_ Rear Unload: \_\_\_\_\_

A/P Contact Name: \_\_\_\_\_ Email : \_\_\_\_\_ Ph #: \_\_\_\_\_

Additional Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Completed By: \_\_\_\_\_ Date: \_\_\_\_\_

Reviewed By : \_\_\_\_\_ Date: \_\_\_\_\_