



HARVEY TOOL

RISK-FREE TEST TOOL PROGRAM APPLICATION FORM

Please **save this form to your computer**, then fill in the information below and email tech@harveytool.com or fax to **978-948-8560**.

Thank you for your interest in our Risk-Free Test Tool Program! To participate, a technical representative must approve the requested tool for your application and provide you with running parameters. A maximum of 2 pieces of the approved tool is allowed. Please note that this is not a free sample and full payment for the test tool is expected within Harvey Tool's standard payment terms. If you are not satisfied with the performance, tools can be returned in any condition for full credit. An advanced written consent and RMA# are required before returning the tools. The tools, completed Feedback Form, and a copy of the RMA must be received within 90 days of the order for the credit to be issued.

Customer Name:	Title:
Company Name:	
Address Line 1:	
Address Line 2:	
City, State:	Zip Code:
Phone:	Fax:
Email:	
Industries Served:	
Your Preferred Distributor*:	Distributor Contact Name:
Distributor Email:	Distributor Phone:

*Harvey Tool sells through select distribution in the United States and Canada. Please visit www.harveytool.com/distributors.

SETUP INFORMATION

Requested Tool Number:	
Work Piece Material:	Hardness:
Type: <input type="checkbox"/> Vertical <input type="checkbox"/> Horizontal <input type="checkbox"/> Lathe	
Max RPM:	Coolant:
Have you used a similar tool in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, who was the manufacturer?
If so, what was your experience?	
What results are you trying to achieve? <input type="checkbox"/> Increase tool life <input type="checkbox"/> Improve cycle time <input type="checkbox"/> Improve finish <input type="checkbox"/> Other _____	
Additional Comments:	