



## Product Application

Please provide the following information about your application.  
This information will help us choose the **BEST** Delta Regis product for your application.

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Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Application's Torque Requirement: \_\_\_\_\_

Fastener size (diameter and length): \_\_\_\_\_

Fastener material (eg. steel, brass, etc): \_\_\_\_\_

Assembled part/threaded hole material (eg. steel, brass etc): \_\_\_\_\_

Any soft gasket materials in the joint?  Yes  No

Any lock washer or thread lock on the fastener?  Yes  No

Is the fastener self-threading/tapping?  Yes  No

Is there any prevailing torque (resistance) prior to the fastener seating?  Yes  No

Approximate number of fasteners installed per minute: \_\_\_\_\_

Number of hours tool will be used per day: \_\_\_\_\_

How will the tool be held?  Handheld  Fixture Mount  Reaction Arm/Torque Arm

Please list any additional information that may be helpful in regards to your production process:

Thank you - we appreciate you taking the time to assist us with your product application.