

MULHERN
BELTING, INC.

Bucket Hole Punch Pattern

Name: _____

Date: _____

Company: _____

Phone #: _____

PO or Reference #: _____

Please Circle Style Needed or Indicate Punch Pattern Below:

Punch Pattern Style: _____

Belt Type: _____

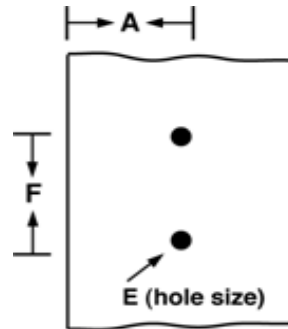
Belt Length: _____

Belt Width: _____

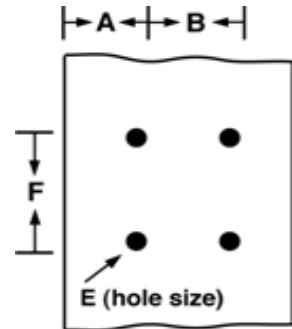
Splice Style: _____

- A. _____ Edge of Belt to Center of 1st Hole
- B. _____ Center Distance Btw. Holes
- C. _____ Edge to Center of First Staggered Hole
- D. _____ Center Distance of Stagger
- E. _____ Diameter of Hole
- F. _____ Center Distance Btw. Buckets

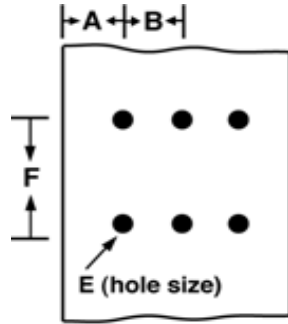
Special Instructions: _____



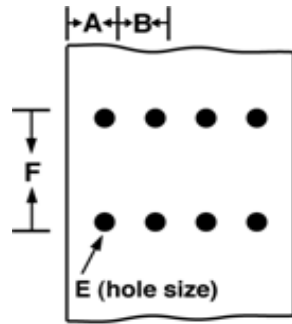
1 | 1 Hole



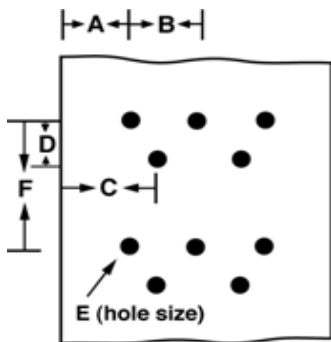
2 | 2 Hole



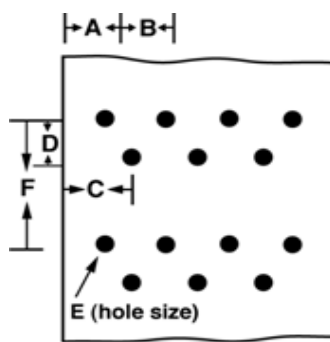
3 | 3 Hole



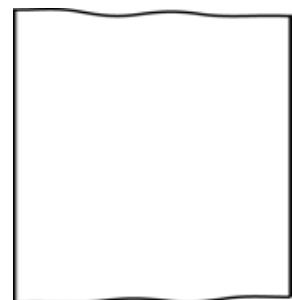
4 | 4 Hole



5 | 5 Hole/Stagger



6 | 7 Hole/Stagger



7 | Other

Please fax this form to **201-337-6540**

Please note : No order will be processed until this form is faxed back