

BUILD MY SHOP

Congratulations on taking the next step in advanced composite education.
Here's how the process works:

STEP 1

The following questionnaire helps us identify the type of program you wish to develop along with everything you will need to carry out a successful start-up. Fill this out with as much detail as possible and submit a copy to sales@pccomposites.com
Print a copy for your records.

STEP 2

Since no two shops are alike, we will probably have some follow-up questions by phone or email. Let us know the best time to make contact. In some cases we may need to visit your facility to determine the appropriate equipment solution.

STEP 3

Once we prepare our bid package, we will schedule a visit to present the program, timelines and deliverables. It is at this time that we can address other questions or alternative solutions. Here we address many common questions about lead time, technical support, warranties, etc.

Composite Shop Set-up

1. What are you teaching?

- Integrating composites into an existing materials program.
- Developing a stand-alone composite course.
- Other: _____

2. Expected number of classes? _____

3. Expected number of students

Currently enrolled in similar courses _____ (auto body/wood/metal)

Projections for three years out _____

4. Do you have ventilation for solvents, cleaner applications (acetone, paints, etc)?

- Yes
- No



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5. Do you have a dust collection system?

- Yes
 No

6. What is your current power configuration?

- 110 volts
 220 volts
 Other: _____

Dimensions

7. What do you envision for footprints of the following spaces:

- Classroom _____ X _____
- Cleanroom (if available) _____ X _____
- General shop _____ X _____
- Dirty room (if available) _____ X _____
- Dimensions of largest entryway into proposed shop (for freezer and oven installation)
W _____ x H _____
- What is your total square footage of space? _____

8. Would you like an implementation plan on our proposed budget if the costs are outside your budget scope?

- Yes
 No

First Name _____

Last Name _____

School _____

City State Zip _____

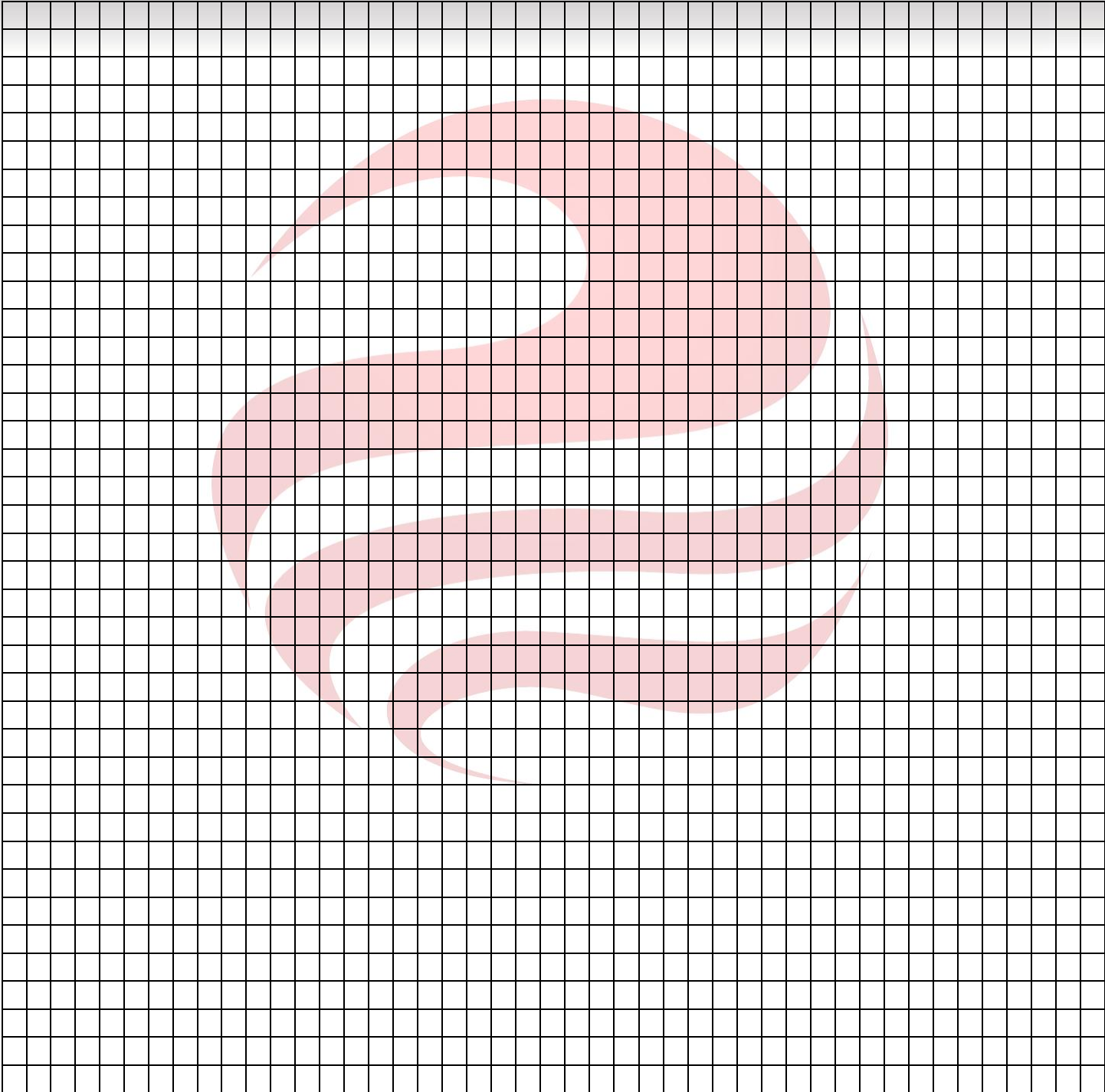
Phone _____

Email _____

Best Time to contact _____



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