

FOR INTERNAL USE ONLY		
QUOTE #	Sales Person	Quote Submitted <input type="checkbox"/> Yes <input type="checkbox"/> No

Company Name: _____

Date: _____

BFG Contact: _____

CLIENT INFORMATION	
Full Name (include Jr. or Sr. if applicable)	Title
Phone <input type="checkbox"/> Cell <input type="checkbox"/> Work	E-Mail Address
Present Company Address (Street, City, State & Zip)	Active Customer <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Past Customer

PRODUCT INFORMATION	
NEW Consumer Product <input type="checkbox"/> Yes <input type="checkbox"/> No	Lead Time Requested
How Critical is Lead Time <input type="checkbox"/> Rush <input type="checkbox"/> Normal	Target Price From Customer
Incumbent Supplier	Estimated Annual Usage (EAU) of this Product
Total Annual Spend on Gearing Products (All Types)	Optional - Competitors Known to be Quoting
Manufacturing Drawings and/or Specifications Available <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Gearbox Manufacturing <input type="checkbox"/> Loose Gearing <input type="checkbox"/> Gearbox Service <input type="checkbox"/> Wind Gearing

SCOPE OF WORK DESCRIPTION

Please send RFQ Request to: Bfgw.isales@bwen.com