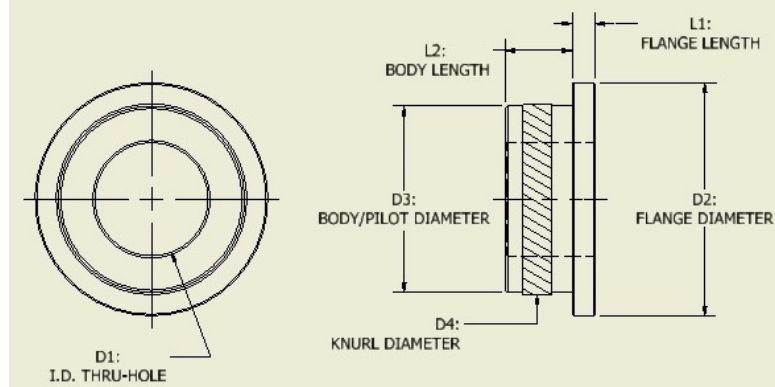
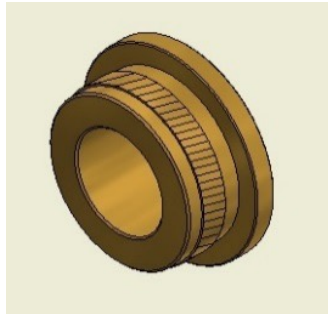


**Design Type: Flanged Short** (For Body Lengths "L2" up to 5/16" (.312") long)



**Dimensional Specifications: Please specify "Required" dimensions. Others are optional or calculated by Tri-Star.**

<b>D1:</b> Required. (I.D. Thru Hole)	<b>L1:</b> Required. (Flange Length)
<b>D2:</b> Required. (Flange Diameter)	<b>L2:</b> Required. (Body Length)
<b>D3: ---</b> Calculated by Tri-Star based on installation method.	
<b>D4: ---</b> Calculated by Tri-Star based on installation method.	

**Material:**  
(Please specify: Brass, Aluminum, Stainless or Steel)

**Finish:**  
(Please specify if required)  
If the finish is not a standard commercially available finish we will require a specification sheet.

**Plastic:**  
Enter the type of plastic that insert will be installed into.

**Installation Method:**  
Please specify: Mold-In, Press-In, Ultrasonic Insertion or Thermal Insertion

**Quantities to Quote:**  
Please specify quantities to quote. Minimum order is 1,000.

**Notes:**

**Please supply your company & contact information below:**



# Compression Limiter Quote Request

<b>Company Name:</b>		
<b>Contact Name:</b>		
<b>Email:</b>	<b>Ph.:</b>	
<b>Street/PO Box:</b>		
<b>City:</b>	<b>ST:</b>	<b>Zip:</b>

\* Please contact our Engineering Department if you need assistance completing this form.