

Flat Bellows

Customer Information	Project Information	
Company	Project/Reference	Qty Required
Address	Application	
City State Zip		
Contact	Replacement Cover New De	esign Nabell Design
Phone Fax	Acceleration Speed	Cycles/day
Email	Requested Material:	Nabell Recomended
Application Information	If unit of measure is not sho	own, please specify
Bellows/Cover Construction: Nabell Recomendation	☐ Heat-Sealed ☐ Folded ☐	Sewn Sewn/Folded
Orientation: Please supply a sketch/drawing/CAD File/model (.dwg, .dxf, .s	stp, .sldprt) or pl	
☐ Horizontal ☐ Vertical ☐ Crossrail	MAX. MIN.	Α
	Stroke	В
		MIN.
		MAX
Z Z Z		
V _a × V _a × × V _a × × × × × × × × × × × × × × × × × × ×	A	Stroke
Environmental Conditions/Protection	'	
☐ Chemicals/Coolant specify type, % concentration, MSDS		Misc Information
Exposure: 🗆 Mist 🔻 He	eavy Spray	☐ Food Grade/FDA
Chips/Particles specify type, size & temp at bellows		☐ Laser
Pressures internal external difference		☐ Water Jet
Clean Room class □ ISO □ FED Electrostatic (spec	cify)	☐ Plasma Cutter
Water/Moisture specify type		☐ Outdoors
Safety/Dust Cover specify		☐ Medical
Weld Spatter/Sparks (Distance from bellows)		Other specify
Ambient Temp Range to Intermittant Tem	p Range to □°F □°C	
Standards/Requirements		
□ REACH: □ RoHS:	COC: [] FAIR:
CONFLICT Minerals:		
Mounting Options		
End 1: ☐ Flange ☐ Holes required (specify/provide drawing) ☐ Hook and Loop (velcro) ☐ Cuff Attachment Dimens		uired No Flange required
End 2:		uired
Will bellows be supported during operation? C-Channel (Nabell recommends providing a method of capture to control any de-	☐ Z-Channel ☐ Cable/Rod ☐ Other _	

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