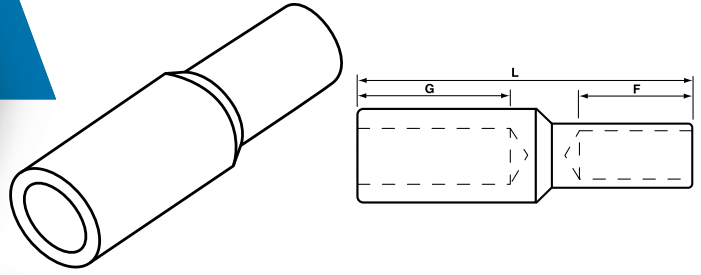


COPPER LINKS CKR

1. Tick a box to identify the standard blank which is closest to your required design.
2. Complete the Conductor Details section inserting your requirements. Please note all details are mandatory.
3. Enter your required dimensions staying within the guidelines in the standards table.
4. Complete customer contact and authorisation details. Please note all details are mandatory.
5. Fax to Utilux Custom Connectors.



1. STANDARDS & GUIDELINES

All dimensions in mm

Catalogue No.	Conductor Range mm ²	F Recommended Lengths	G	L Max
<input type="checkbox"/> CKX10-35/1	10-35	24	24	60
<input type="checkbox"/> CKX50-70/1	50-70	24	24	60
<input type="checkbox"/> CKX95-120/1	95-120	38	38	92
<input type="checkbox"/> CKX150-185/1	150-185	38	38	92
<input type="checkbox"/> CKX240-300/1	240-300	44	44	237
<input type="checkbox"/> CKX400-500/1	400-500	59	59	145
<input type="checkbox"/> CKX630/1	630	59	59	145

2. CONDUCTOR DETAILS

LARGE END		SMALL END	
<input type="checkbox"/> Metric	<input type="checkbox"/> Imperial	<input type="checkbox"/> Metric	<input type="checkbox"/> Imperial
Area: mm ² /in ²		Area: mm ² /in ²	
<input type="checkbox"/> Flexible		<input type="checkbox"/> Flexible	
<input type="checkbox"/> Compacted	Stranding:	<input type="checkbox"/> Compacted	Stranding:
<input type="checkbox"/> Other		<input type="checkbox"/> Other	

3. REQUIRED SPECIFICATIONS

Dimensions: (IF NON-STANDARD)

F: _____ mm

G: _____ mm

Qty: _____

Comments: _____

4. CUSTOMER DETAILS

Company: _____

Requested by: _____

Tel: _____

Purchase Order No: _____

TE INTERNAL SALES USE ONLY

Part No: CKR

Sales Order No: _____

Drawing No: _____

Entered by: _____

5. FAX THIS FORM TO UTILUX CUSTOM CONNECTORS - (02) 9502 2062

ORDERS FAXED TO UTILUX CUSTOM CONNECTORS BY 3PM WILL BE DESPATCHED BY 3PM WITHIN 2 BUSINESS DAYS OF FAX STAMP DATE

SPECIALY MANUFACTURED PRODUCTS CANNOT BE RETURNED FOR CREDIT.