|  |  |
| --- | --- |
| **Application Title: \*** |  |
| **Industry Type: \*** |  |
| **Application Area: \*** |  |
| **Country: \*** |  |

|  |  |
| --- | --- |
| **Company Name:** |  |
| **Contact & Position Title:** |  |
| **Overview / description of the application: \*** |  |
| **Previous Method:** |  |
| **Issue with Previous Method:***i.e. safety, cost, time taken, machine failure* |  |

|  |
| --- |
| Application – Previous Method (Insert Picture) |
| **Technical Specification:** |  |
| **Torque Required:** |  |

|  |
| --- |
| Application – Solution (*insert picture*) |
| **Product: \*** |  |
| **Safety Benefits:** |  |
| **Time Benefits:** |  |

|  |  |
| --- | --- |
| **Application Value:** |  |

\* Indicates required field

Please consider whether the data intended for this form is of a sensitive nature. Do not include any information which contravenes any agreement or contract protecting such data. The provided information may be used for potential Marketing activities.