

WARREN RUPP, INC.
A Unit of IDEX Corporation
800 North Main Street
P.O. Box 1568
Mansfield, OH 44901-1568 USA
www.warrenrupp.com

Phone: (419) 524-8388
Fax: (419) 524-0617
Mail to: apptech.warrenrupp@idexcorp.com

SANDPIPER® 30-Day Trial Pump Request Form

PLEASE NOTE: By accepting the terms of this Trial Application by IDEX AODD and Distribution, a pump/product will be sent on a no charge basis for the trial period stated above. At the end of the trial period (starting from time of shipment), an invoice will automatically be generated and sent. If the Terms of a Successful Trial is not met, Distribution must complete and return the trial pump results form (attached) at the end of the trial period or an invoice will automatically be generated.

General Information

Date Submitted: _____

Distributor _____

Commercial Approval: _____

END USER INFORMATION – (please complete regardless of shipping arrangements)

Company: _____

End User Company Contact Name: _____

Shipping Address: _____

City / State / Province / Postal Code

Country (if outside U.S.) Phone Fax

Mailing Address (if different from shipping address): _____

E-mail address: _____

EXISTING & TRIAL PUMP DETAILS

Terms of a Successful Trial: _____

Trial Pump Model : _____ Requested Ship Date: _____

How has the current pump performed? _____

Note any specific problems: _____

End user Signature: _____

Date: _____

Please provide application details on pg. 2 and 3 of this form.

APPLICATION DETAILS

Fluid

Flow required: _____ **GPM/LPM**

Are You Pumping Solids: (Yes) _____ (No) _____ If yes, approximate size: _____

Non-Suspended Solids: (Yes) _____ Suspended Solids (Yes) _____

Do you presently sell to this account? _____ Yes: _____ NO: _____

Warren Rupp SandPiper only: _____

Warren Rupp SandPiper & Others: _____ Wilden: _____ Other: _____

Other Products Only: _____ Aro: _____ VersaMatic: _____

No. of units: _____

Estimate total potential AODD pump sales at this account (\$):

Less than \$ 1000 :

1000 – 5000 :

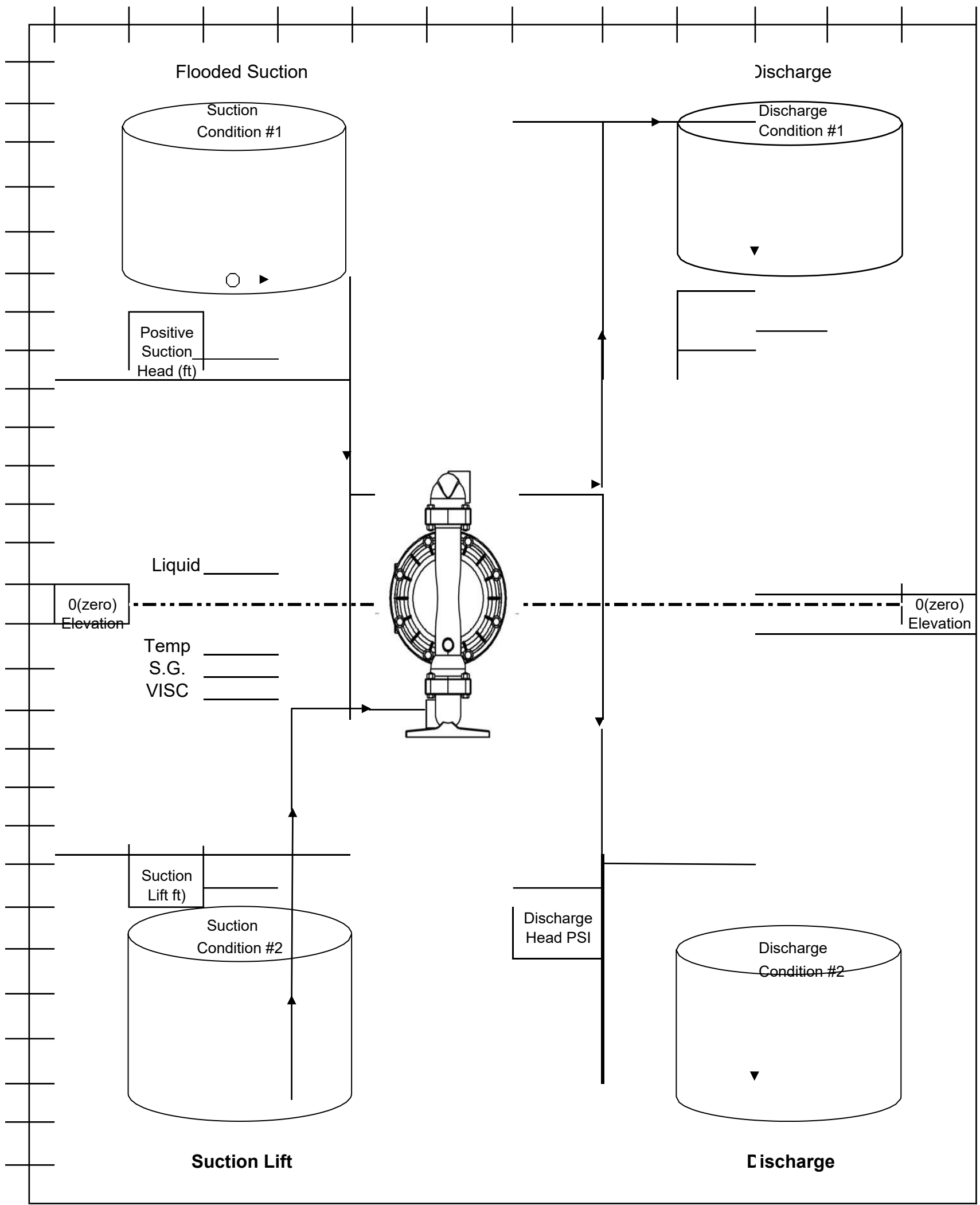
5000 – 10000 :

10000 – 25000:

25000 or more :

Don't Know :

Please provide application details on next page.



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<h2>Trial Pump Results</h2>

Was the Trial Successful? Yes _____ No _____

If not, how did it not meet the Terms of a Successful Trial _____

Please Note: If the Terms of a Successful Trial is not met, Distribution must complete and return this this page at the end of the trial period or an invoice will automatically be generated.

Please Submit form to: apptech.warrenrupp@idexcorp.com

Signature _____

Date: _____

Approved _____

Date: _____

For IDEX AODD Use Only			
Inventory Transaction Number:	<input type="text"/>	Date:	<input type="text"/>
IR Number:	<input type="text"/>	Date:	<input type="text"/>
Invoice Number:	<input type="text"/>	Date:	<input type="text"/>