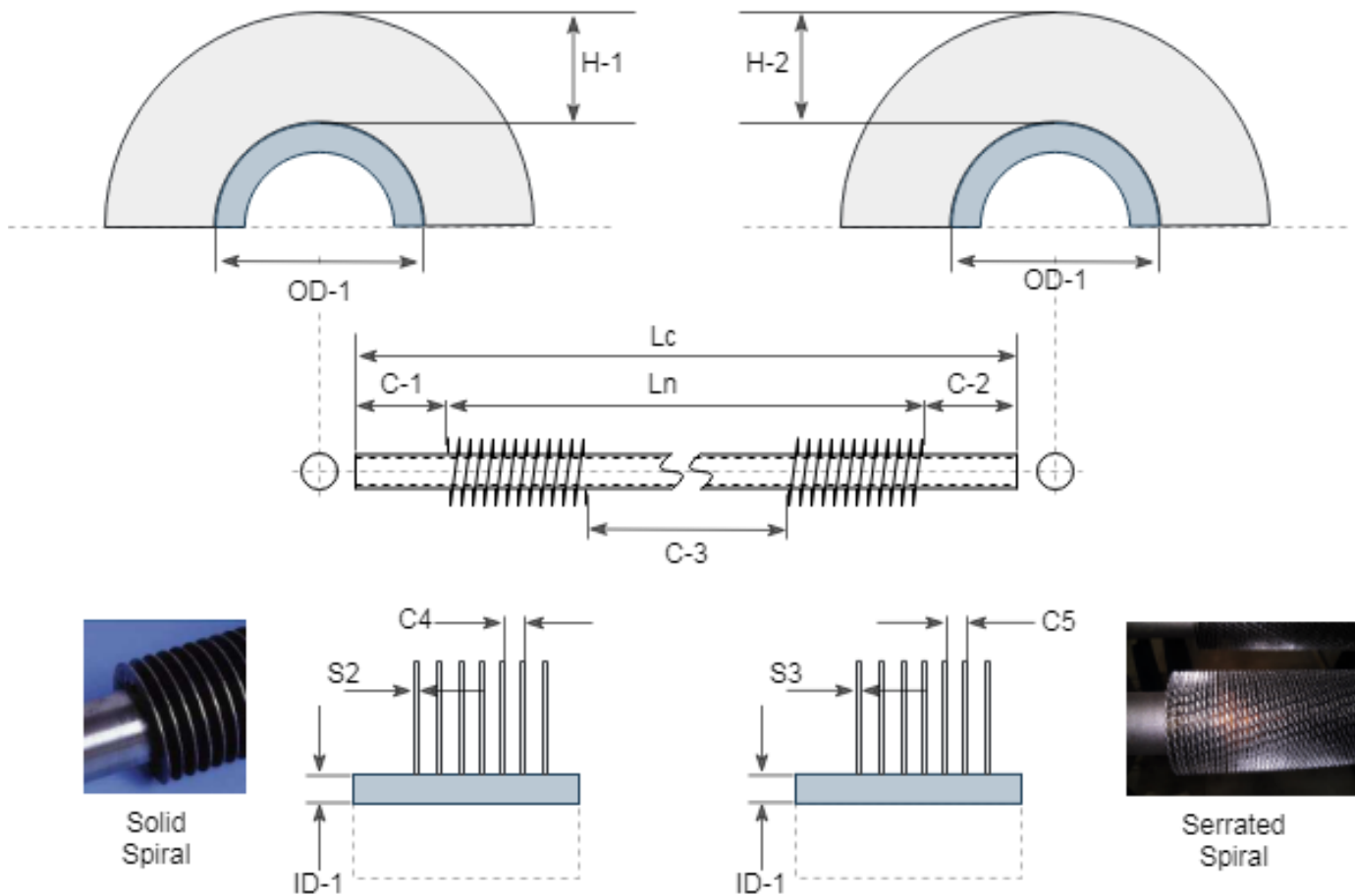


# AMS Laser Fin

Date:	
Title:	
First Name:	
Surname:	
Company Name:	
Address:	
Telephone:	
Email:	



Finned Tube Build	Description	Dimension	Notes
No. of Finned Tubes Required	No.		
Tube: Seam/Seamless			
Total Tube Length	Lc		
Total Finned Length	Ln		
Bare Tube Length	C-1		
Bare Tube Length	C-2		
Center Tube Length	C-3		
Tube OD	OD-1		
Tube ID	ID-1		

# AMS Laser Fin

		Dimension	Notes
Fin Height	H-1		
Fin Diameter	H-1+OD-1		
Fin Material			
Serrated	Yes/No		
No. fins / inch			
Fin Thickness	S2		
Fin Distance	C4		
Beveling	Yes/No		
If Required		Dimension	Notes
Fin Height	H-2		
Fin Diameter	H-2+OD-1		
Fin Material			
Serrated	Yes/No		
No. fins / inch			
Fin Thickness	S3		
Fin Distance	C5		
Beveling	Yes/No		
			Notes
Transportation coating			

Notes:

Email: [LaserFin@ams-laserfin.com](mailto:LaserFin@ams-laserfin.com)