



Mold-Vac Application Criteria

CAE Services Corporation
280 Belleview Lane, Batavia IL 60510
630.761.9898 / www.moldvac.com

Date: _____

Customer Information

Company _____
Address _____
City _____
State _____ Zip _____
Contact _____
Position _____
Phone _____ Cell _____
Email _____

Quotation Requirements

1st Stage Fill Time _____
Total Cycle Time _____
Part Volume (in³) _____
Cavitation _____
Core/Cavity plan & section views
Rejected parts

Market

- Appliance
- Automotive
- Electronic
- Medical
- Packaging
- Other _____

What type of molding problems are you currently experiencing?

- Part Failure
- Warpage
- Non Fills
- Part burns
- Air/Gas entrapment
- Extended Cycle Times

- Do you currently have a mold experiencing problems with gas or air entrapment? Yes No
- Is the gas or air trap opposite the gate? Yes No
- Are you sacrificing cycle time to allow the air and gas to vent? Yes No
- Have you changed the vent depth to try to improve venting? Yes No
If yes, what happened? _____
- Have you tried slowing down the fill time (e.g. 1 to 1.5 seconds) to allow for additional Yes No
time for the air and gas to vent?
If yes, any improvements? _____
- Does residue build up in vent pins, impact part quality or mold maintenance? Yes No
- Any experience with Mold-Vac or vacuum systems? Yes No
- Current reject rate for this project? _____
- If this problem was resolved how much money would you save? _____
- Is this problem of low, medium, or high priority? _____
- When is a solution required? _____

Comments