

App	Dilication Data Sheet_				
Company:	Contact Person:			<u>Date</u>	
Phone:	Fax:		Email:		
Type of Analysis:	Failure Analysis RA Anal	ysis	tion		
Axis of Rotation:	Vertical Horizontal	Inclined [
Rotation: Contin	uous Intermittent Max RPM:	Max. Tem	p: Min.	Temp	
Bearing type:					
Deep groove ball Double row self aligning	Spherical roller Roller thrust Ball thrust Corrugator roller bearing bearing	Four point angular contact bearing	Angular contact ball bearing Support roller bearing	Four row cylindrical	Slewing bearing
Other:					
Bearing Dimensions	s – Inches / mm				
Part Number:	Bo	earing Manufacture	r: Qı	uantity:	
ID (Bore):	OD: Inner Race Wid	th:	Outer Race Wid	th:	
Additional Informat	<u>tion</u>				
What kind of lubrica	ation system and seals are used?				
When was the last s	ervice performed? Is there a maintena	nce schedule?			
Describe the operat	ing environment; Indoors, outdoors, ex	cessive mud or deb	ris, exposure to mo	oisture.	
Describe installation	n and removal methods:				
Describe bearing sto	orage and handling methods:				
Has bearing been pr	reviously repaired or re-conditioned?				
Equipment Manufac	cturer:Equip	oment Model:			
Type of Equipment	used on:				

ATTN: SBC Engineering Department

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