



# Design Assistance Datasheet – Machine Tending Form

\*All fields are required

## Customer Information

Company Name: \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

## Required Items

Send 2D Drawing (\*.PDF or \*.edrw) or 3D Model (\*.STEP) of the part BLANK that is to be loaded (Identify grip area & part orientation/accessibility).

Send 2D Drawing (\*.PDF or \*.edrw) or 3D Model (\*.STEP) of the FINISHED parts that is to be unloaded (Identify grip area & part orientation/accessibility).

If available, please provide a layout drawing of the work area or simulation of the process/operations.

## Application Information (Check all that apply)

Machine Type: CNC Mill    Lathe (Single Spindle)    Lathe (Dual Spindle)    Laser Engraver    Other: \_\_\_\_\_

Cycle Time: \_\_\_\_\_

Robot to perform the following:    Load Parts    Unload Parts    Other: \_\_\_\_\_

Door Functionality:    Automatic Door    Manual Door (Robot to open the door)    No Door

## Part Information

Part Name / ID#: \_\_\_\_\_

Material: \_\_\_\_\_

Blank Part: Mass (Specify units): \_\_\_\_\_

Surface Conditions:    Dry Surface    Lubricated Surface    Does not Apply

Finished Part: Mass (Specify units): \_\_\_\_\_

Surface Conditions:    Dry Surface    Lubricated Surface    Does not Apply

## Robot Information

Robot Manufacturer: \_\_\_\_\_

Robot Type / Model: \_\_\_\_\_

Robot Payload: \_\_\_\_\_

Robot Mounting:    Direct Mount (ISO 9409-1-50-4-M6)    Direct Mount, Other (Please include drawing)

Blank Plate (I'll make my own)    Quick Changer, Please specify: \_\_\_\_\_

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## EOAT Configuration

Select EOAT Configuration:



Single Gripper (in-line)



Single Gripper (offset)



Two Gripper (90° offset)



Two Gripper (180° offset)

Custom Application:

|  |                                    |                      |                             |              |                    |               |
|--|------------------------------------|----------------------|-----------------------------|--------------|--------------------|---------------|
| Gripper Fingers Required:  | Yes, please include gripper finger | No, I'll make my own |                             |              |                    |               |
| If yes, Finger Material:   | Aluminum                           | Steel                | Stainless Steel             | Acetal (POM) | Nylon (3D-Printed) | No Preference |
| Additional Features / Equipment Related: (select all that apply) | Pneumatic Solenoid Valves          |                      | Filter / Pressure Regulator |              |                    |               |
| Blow-off (on robot)  | Other:                             |                      |                             |              |                    |               |

## Sensor / Electrical Information

|                         |                |               |
|-------------------------|----------------|---------------|
| Gripper / Part Sensing: | Yes            | No            |
| Signal Type:            | PNP (sourcing) | NPN (sinking) |

**Please specify Sequence of Operations, Finished Part Constraints, Contact Areas and Notes**