

POWELL MACHINE INC CAMSHAFT RECOMMENDATION FORM

NAME: _____ DATE: _____

ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHONE: _____ EMAIL: _____

WHICH TYPE OF CAMSHAFT ARE YOU INTERESTED IN

<input type="checkbox"/> HYDRAULIC	<input type="checkbox"/> ROLLER	<input type="checkbox"/> MUCHROOM	<input type="checkbox"/> OTHER:
<input type="checkbox"/> SOLID	<input type="checkbox"/> HYDRAULIC ROLLER	<input type="checkbox"/> REGRIND	

DESIRED ENGINE PERFORMANCE

<input type="checkbox"/> MORE LOW SPEED TORQUE
<input type="checkbox"/> MORE MID-RANGE POWER
<input type="checkbox"/> MID-RANGE & TOP END POWER

TYPE OF SERVICE REQUESTED

<input type="checkbox"/> RECOMMEND CAM & KIT
<input type="checkbox"/> REGRIND ENCLOSED CAM

ENGINE APPLICATION

<input type="checkbox"/> STREET ONLY	<input type="checkbox"/> DRAG RACE	_____ CLASS _____	<input type="checkbox"/> OFF ROAD ONLY	<input type="checkbox"/> MARINE
<input type="checkbox"/> STREET/STRIP	<input type="checkbox"/> OVAL TRACK	_____ TRACK LENGTH _____	<input type="checkbox"/> TRUCK/TRACTOR PULL	<input type="checkbox"/> OTHER:

ENGINE SPECIFICATIONS

ENGINE MAKE: _____	YEAR: _____	CIRCLE 25" OR 28" OF WATER
CUBIC INCHES: _____	BORE & STROKE: _____	.200" Int _____ Exh _____
# of CYLINDERS: _____	FUEL: _____	.300" Int _____ Exh _____
ROCKER ARM RATIO: _____	CARB CFM: _____	.400" Int _____ Exh _____
PISTON MAKE: _____		.500" Int _____ Exh _____
COMPRESSION RATIO: _____	INTAKE MANIFOLD: _____	.600" Int _____ Exh _____
SUPERCHARGER/TURBO _____	VALVE HEAD DIA: _____	.700" Int _____ Exh _____
DRIVE RATIO: _____	VALVE SIZE: (INT/EXH) _____	.800" Int _____ Exh _____
TAPPET DIAMETER _____	PORTED/AMOUNT: _____	.900" Int _____ Exh _____

CHASSIS/RPM INFORMATION

WEIGHT: _____	YEAR & MAKE: _____
REAR AXLE RATIO _____	TRANSMISSION TYPE: _____
MIN/MAX RPM _____ to _____	OVERDRIVE % _____
STALL SPEED: _____	TIRE DIAMETER _____

CURRENT CAMSHAFT INFORMATION

TYPE OF TAPPET DESIGN (HYD,ROLLER,SOLID,etc) _____			
ADVERTISED DURATION:	INTAKE: _____	EXHAUST: _____	
DURATION @ .050"	INTAKE: _____	EXHAUST: _____	
LOBE LIFT w/o RATIO:	INTAKE: _____	EXHAUST: _____	
LOBE SEPARATION:	_____		
PERFORMANCE REMARKS:	_____		

Please complete all of the above information and email to: powellmachineinc@gmail.com

Send Camshaft to:
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Iva, S.C. 29655

powellmachineinc.com