



Program Equipment Recommendations

This form is to be used to recommend equipment be **added** or **deleted** from the program(s).

Product Name: Tecna Smart Welders 3664/3664+ Submitted: 8/16/2010

Supplier: Cebotech, Inc.

Part Number: TBD (probably CBI3664, CBI3664PLUS)

Product Description: Resistance spot welder with "smart" digital control unit that can override user selections if feedback to control unit warrants it. 3664 includes gun 8679T, 3664+ includes gun 8679TS.

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|---|--|--|---|
| Does this recommendation add or delete from the program(s)? | <input checked="" type="checkbox"/> Add | <input type="checkbox"/> Delete | |
| Which program does this recommendation apply to? | <input checked="" type="checkbox"/> TADE | <input checked="" type="checkbox"/> LADE | |
| Is this a new product? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Does this product supersede an existing approved product? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | |
| Old superseded part number | <u>CBI3450</u> | | |
| Is product documentation attached? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | Is a product list attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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|--|---|--|---|
| 1. Is there a similar piece of equipment already in the program? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 2. Is there more than three pieces of similar products? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 3. Does the manufacturer support the required 1-year warranty? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 4. Is the equipment supported by a service policy? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 5. Does the supplier offer training on the equipment? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 6. Is the training "on-site"? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 7. Is there a cost associated with the training? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A |
| 8. Is the equipment available in different colors? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A |
| 9. Does the equipment require installation? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A |
| 10. Does the dealer pay for the installation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> N/A |
| 11. Are there any lubricants, additives or accessories required for use? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A |
| 12. Is the equipment in any other equipment program? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 13. Is this an environmentally safe program? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> N/A |
| 14. Is this equipment designed for environmental protection? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> N/A |
| 15. Is this equipment specifically designed for safety? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 16. Does this equipment require a demonstration? | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A |

Date: 8-17-10 Authorized By:

Please return authorized form via fax to: 262-656-6007.

| EQS USE ONLY | | | |
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