

Tooling for Die Casting

13 Checklist for Die Casting Die Specifications (To be used in consultation with your Die Caster)

Part 1 – New Die Casting Dies: Items to be Addressed

In the case of new die casting dies, all of the items in Part 1, below, should be reviewed. Note, in the case of tooling to be transferred to, or “inherited” by a die caster, the items asterisked (*) in Part 1 should be addressed, plus the items noted in Part 2 on the next page.

Type of New Die	<input type="checkbox"/> Prototype Die Casting Die <input type="checkbox"/> Production Die Casting Die
Cavity Steel*	<input type="checkbox"/> H13 <input type="checkbox"/> Premium Grade H13 <input type="checkbox"/> Superior Grade H13 <input type="checkbox"/> Other Tool Steel: _____ NADCA No. 229 Certification Required: <input type="checkbox"/> Yes <input type="checkbox"/> No Grade _____ Class _____
Cavity Steel Heat Treat*	<input type="checkbox"/> Hardness Required: <input type="checkbox"/> Toughness Required: _____ ft.-lbs NADCA No. 229 Certification Required: <input type="checkbox"/> Yes <input type="checkbox"/> No
Cored Holes*	<input type="checkbox"/> All Holes Cored <input type="checkbox"/> Cored Holes As Noted On Print <input type="checkbox"/> No Cored Holes
Die Operation for Part Features*	<input type="checkbox"/> Mechanical Movement <input type="checkbox"/> Hydraulic Movement <input type="checkbox"/> Features To Be Achieved By Secondary Operations
Estimated Part Volume	Monthly: _____ Annual: _____ Expected Product Life: _____
Casting Alloy*	<input type="checkbox"/> Aluminum <input type="checkbox"/> Copper <input type="checkbox"/> Magnesium <input type="checkbox"/> Zinc ZA: <input type="checkbox"/> ZA-8 <input type="checkbox"/> ZA-12 <input type="checkbox"/> ZA-27
Casting Weight	Estimated Casting Weight: _____
As-cast Part Finish*	<input type="checkbox"/> Mechanical Grade (Functional Finish) <input type="checkbox"/> Painting Grade <input type="checkbox"/> Highest Quality (Cosmetic Finish) For Plating, Etc.
Class of Die	<input type="checkbox"/> Unit Die <input type="checkbox"/> Single Cavity <input type="checkbox"/> Conventional Die <input type="checkbox"/> Multiple Cavity <input type="checkbox"/> Multiple Cavity - Family Die
Cast-In Date Insert*	<input type="checkbox"/> In Die Cavity <input type="checkbox"/> Other Requirements: _____ <input type="checkbox"/> Not Required
Cast-In Part Number*	<input type="checkbox"/> In Die Cavity <input type="checkbox"/> Other Requirements: _____ <input type="checkbox"/> Not Required

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Checklist

2

This two-part specification checklist is intended for use in consultation with your die caster prior to estimation of new die design and construction, or prior to die casting production using “inherited” tooling. It should be used in combination with checklists C-8-1 and C-8-2 in Commercial Practices, Section 8.