

HSP Tipping Feeder Project Survey



Date: _____

Customer Information

Company Name: _____

Tel: _____

Contact Name: _____

Fax: _____

Title: _____

E-mail: _____

Address: _____

Website: _____

Industry: _____

Distributor: _____

Phone: _____

Distributor Contact: _____

E-Mail: _____

Application Information

Required Production Start Date: _____

First Production Quantity: _____

First Production Ship Date: _____

Host System make/model: _____

Product Information

Product 1

Product 2

Product 3

Product 4

	Product 1	Product 2	Product 3	Product 4
Type				
Width				
Length				
Thickness				
Coating				
Static				
Size Variation				
Curl				
Folds (single - tri)				
Perforations				
Die Cut				
% of production				
Orientation (based on host system)				
Color				
Material				

Performance Information

Pieces per Blank: _____

Placement Tolerances: _____

Desired blanks per minute: _____

Spacing per pc. per blank: _____

Maximum Host Line Speed: _____
(feet per minute)

Spacing btw/ blanks: _____

Machine Specifications

Start Signal Method: _____

Fusion to provide

Available Power: _____

(required power: _____)

Menu/Manual language: _____

Controls on Left / Right / Remote: _____ As viewed from back, right is standard

Desired signals from feeder: _____

Vacuum available/strength: _____

Application Sketch

Machine Layout

Blank Layout

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Additional Information

Please fax to (888) 661-2651

or e-mail to sales@fusion-concepts.com

Signature: _____