

Wrapper Project Survey



Customer Information

Date: _____

Company Name: _____

Tel: _____

Contact Name: _____

Fax: _____

Title: _____

E-mail : _____

Address: _____

Website: _____

Industry: _____

Distributor: _____

Phone: _____

Dist. Contact: _____

E-mail: _____

Application Information

Host System make/model: _____

Required Production Start Date: _____

First Production Quantity: _____

First Production Ship Date: _____

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				
Perforations				
Die Cut				
% of production				
Orientation				
Color				
Material				

Performance Information

Batch Counts (min/max): _____ Package Size Tolerances: _____
Desired Packs per Minute: _____ Package stack order: _____
Single or Double Track: _____

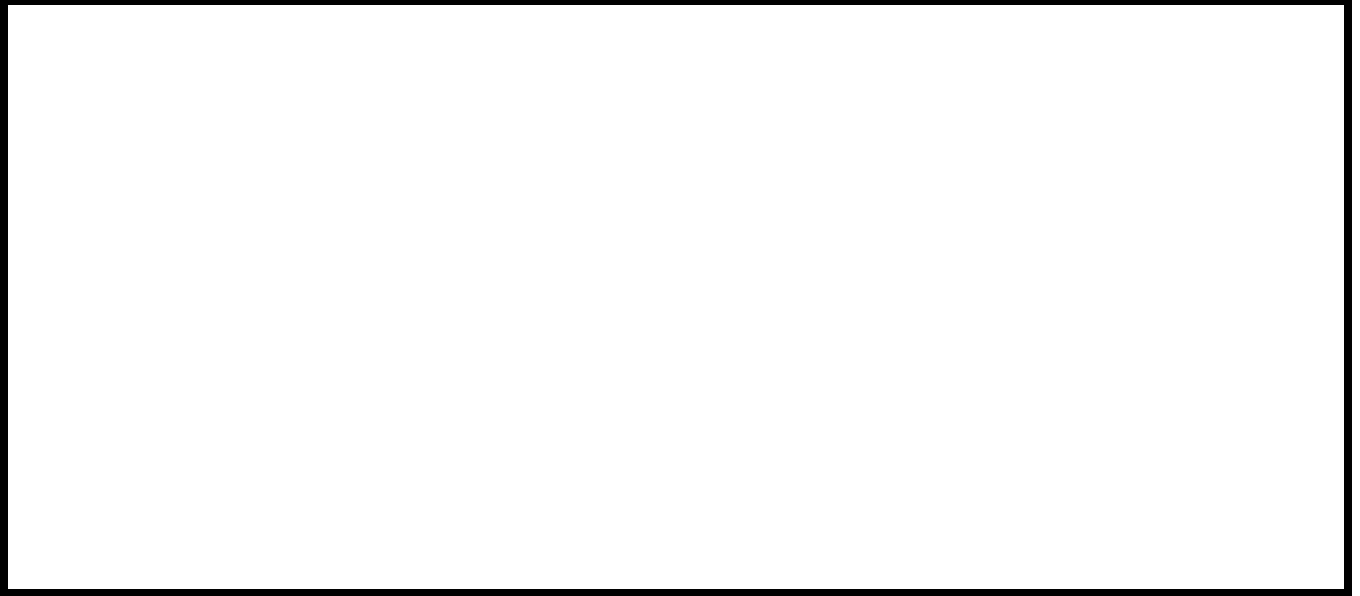
Machine Specifications

Available Power: _____
Menu/Manual language: _____

Available Options

- | | | | |
|--------------|---|----------------|--|
| Sealer Bar: | <input type="checkbox"/> Permanent | Double track: | <input type="checkbox"/> Single lane |
| | <input type="checkbox"/> Wire | | <input type="checkbox"/> Double lane |
| Film: | <input type="checkbox"/> Printed | Folding Unit: | <input type="checkbox"/> Fold after wrap |
| | <input type="checkbox"/> Unprinted | | <input type="checkbox"/> No fold after wrap |
| Closure: | <input type="checkbox"/> Resealable tape | Squaring Unit: | <input type="checkbox"/> Squaring unit |
| | <input type="checkbox"/> Permanent Tape | | <input type="checkbox"/> No squaring unit |
| | <input type="checkbox"/> No Tape | | |
| Header: | <input type="checkbox"/> with header | Perforator | <input type="checkbox"/> Perforated film |
| | <input type="checkbox"/> without header | Wheel: | <input type="checkbox"/> Non perforated film |
| Chain Packs: | <input type="checkbox"/> with chain pack | Batch | <input type="checkbox"/> Batch bander |
| | <input type="checkbox"/> without chain pack | Bander: | <input type="checkbox"/> No batch bander |
| Thermal | <input type="checkbox"/> with thermal printer | | |
| Printer: | <input type="checkbox"/> without thermal printer | | |
| Hole Punch: | <input type="checkbox"/> with Hole Punch | | |
| | <input type="checkbox"/> without Hole Punch | | |
| Conveyor | <input type="checkbox"/> Conveyor with counter | | |
| Stacker: | <input type="checkbox"/> Conveyor without counter | | |
| | <input type="checkbox"/> No Conveyor | | |

Application Sketch



Additional Information

Please fax to (888) 661-2651

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

Signature: _____