

# Case Sealer Information Request Form



Date: \_\_\_\_\_

Type of Quote Requested:

Budget  Formal

Model to be Quoted

Uniform Sealers  Model T-400  Model T-500  Model T-600  
 Random Sealers  Model T-660  Model G-660  Model T-670-HS  Model T-770-HS

Customer Information:

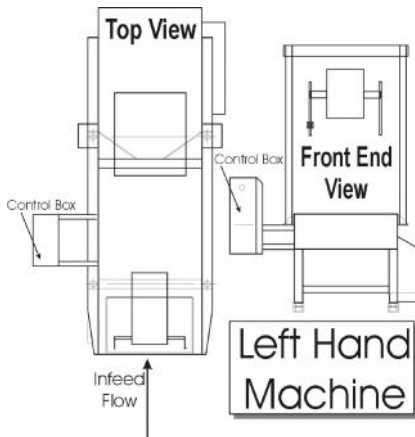
Customer Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City-State-Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Cell Number \_\_\_\_\_ Fax \_\_\_\_\_  
 E-mail \_\_\_\_\_ Contact Person \_\_\_\_\_

Case Sizes: (Please verify that dimensions are Outside Dimensions)

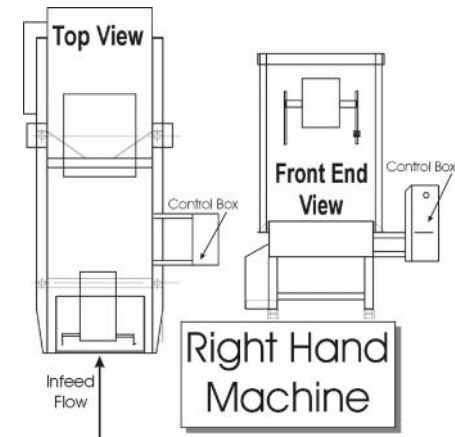
Formed Case Dimensions	Estimated usage of each case size	Weight Min.-Max.
A: L _____ W _____ H _____	_____ %	_____ lbs. _____ lbs.
B: L _____ W _____ H _____	_____ %	_____ lbs. _____ lbs.
C: L _____ W _____ H _____	_____ %	_____ lbs. _____ lbs.
D: L _____ W _____ H _____	_____ %	_____ lbs. _____ lbs.
E: L _____ W _____ H _____	_____ %	_____ lbs. _____ lbs.
F: L _____ W _____ H _____	_____ %	_____ lbs. _____ lbs.

Hand of Machine:

Left Hand



Right Hand



Case Style:

RSC (Regular Slotted Container)



OSC (Overlap Slotted Container) or POL (Partial Overlap Container)



CSSC (Center Special Slotted Container) or AFM (All Flaps Meet)



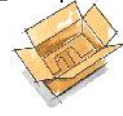
FTHS (Full Telescope Half Slotted Container)



FOL (Full Overlap Container)



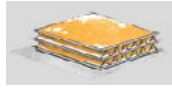
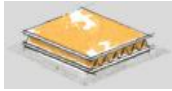
Snap or 1-2-3 Bottom with RSC top



Corrugated Questions:

Single Wall

Double Wall



If the case is double wall, is the case also double scored?  Yes  No

Bursting Test/Edge Crush Test: \_\_\_\_\_

Do you often re-use the cases?  Yes  No

Type of Sealing:

Sealing Location:  Top Only  Bottom Only  Top & Bottom

Sealing Method Top —  Tape  Glue Bottom —  Tape  Glue

Tape:  2" tape  3" tape What is your tape brand preference if any? \_\_\_\_\_

Glue: Do you have a glue preference?  Yes  No If Yes \_\_\_\_\_

Do you require a Case Pass Through Option?  Yes  No note: This may require a retractable bottom tape head.

Plant Operation:

Number of Shifts per day \_\_\_\_\_ Number of Case Size Changeovers per shift \_\_\_\_\_

Number of cases produced each day \_\_\_\_\_

Current Production Speed: (cases per min) \_\_\_\_\_ Future Production Speeds (cases per min) \_\_\_\_\_

Type of Product:

Describe the product: \_\_\_\_\_

How is the Product Packed?  Rigid  Soft  Underpacked  Overpacked Over/Under by how much? \_\_\_\_\_

Position of Top Flaps:  Up  Down  Folded down for packing Degree measure? \_\_\_\_\_° (In inches)

Plant Environment:

Dusty  Dry  Moist  Washdown  Other \_\_\_\_\_

Machine Specifics:

Adequate Air Supplied [3-7 cfm @ 90 psi]  Yes  No

Voltage Required: \_\_\_\_\_ Phase Required \_\_\_\_\_ (If Different than Standard)

(Standards: Model T-600, T-660, T-750 and G-950 is: 240/480 volt; 3 phase Model T-400 and T-500 120/220 volt; 1 phase)

Infeed Conveyor Height (in inches): \_\_\_\_\_  Non-Powered  Powered (speed in feet /min) \_\_\_\_\_

Discharge Conveyor  Non-Powered  Powered (speed in feet /min) \_\_\_\_\_

Special Requests:

Specification Package?  Yes  No Electrical Package?  Yes  No

Mechanical Package?  Yes  No Other Package?  Yes  No

Special Options:

Special Paint Required?  Yes  No If yes, what type and /or color: \_\_\_\_\_

PLC machine control requested:  Yes  No Brand of PLC: \_\_\_\_\_

Castors  Yes  No Do you have special guarding requirements?  No  Yes \_\_\_\_\_

Will this replace existing equipment?

Yes  No If so, what manufacturer? \_\_\_\_\_

Why? \_\_\_\_\_

What is being used for Case Erecting?

\_\_\_\_\_

Purchase Information:

Anticipated Purchase Date: \_\_\_\_\_ Anticipated Installation Date: \_\_\_\_\_