

STANDARD CARTON SEALER APPLICATION FORM

M, A, & R-series

END USER INFORMATION

DISTRIBUTOR INFORMATION

Company Name

Address

City State Zip Code

Contact Name & Title

Telephone No.

E-Mail

Company Name

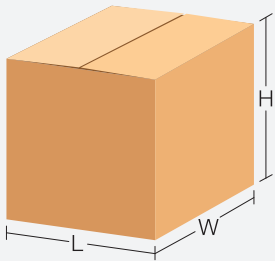
Address

City State Zip Code

Contact Name & Title

Telephone No.

E-Mail



LENGTH	WIDTH	HEIGHT	WEIGHT	% OF PRODUCTION

CARTON STATUS

Filled

Underfilled

Overfilled

Re-Used

SAMPLE CARTONS SENT

Yes No

CARTON INFORMATION

<p>CARTONS</p> <p><input type="checkbox"/> RSC</p> <p><input type="checkbox"/> HSC</p> <p><input type="checkbox"/> FOL</p> <p><input type="checkbox"/> Other</p>	<p>CARTON TO BE TAPED:</p> <p><input type="checkbox"/> Top & Bottom</p> <p><input type="checkbox"/> Top Only</p> <p><input type="checkbox"/> Bottom Only</p> <p><input type="checkbox"/> Side Seal</p> <p><input type="checkbox"/> Edge Seal</p> <p><input type="checkbox"/> Bypass Needed</p>	<p>TAPE:</p> <p><input type="checkbox"/> 2" (48mm)</p> <p><input type="checkbox"/> 3" (72mm)</p> <p><input type="checkbox"/> 4" (96mm)</p> <p><input type="checkbox"/> 6" (144mm)</p>	<p>Conveyor Height: <input style="width: 100%;" type="text"/></p> <p>Packing Room Temperature: <input style="width: 100%;" type="text"/></p> <p>PACKING ROOM CONDITIONS:</p> <p><input type="checkbox"/> Normal <input type="checkbox"/> Wet <input type="checkbox"/> Dusty <input type="checkbox"/> Corrosive</p>
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<p>ARE YOU RUNNING:</p> <p><input type="checkbox"/> In Batches <input type="checkbox"/> Random</p>	<p>SHOULD THE MACHINE CLOSE:</p> <p><input type="checkbox"/> Top Flaps <input type="checkbox"/> Bottom Flaps</p>	<p>WILL THERE BE AN OPERATOR TO FEED THE MACHINE?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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<p style="text-align: center;">POWER REQUIREMENTS</p> <p>FLOW DIRECTION STANDING IN FRONT OF ELECTRICAL BOX:</p> <p><input type="checkbox"/> Right to Left (Standard)</p> <p><input type="checkbox"/> Left to Right</p> <p>ELECTRICAL REQUIREMENTS</p> <p>Volts <input style="width: 50px;" type="text"/></p> <p>Phase <input style="width: 50px;" type="text"/></p>	<p style="text-align: center;">AIR REQUIREMENTS</p> <p>IS THERE AN AIR DRYER?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>PSI: <input style="width: 50px;" type="text"/></p> <p>SCFM: <input style="width: 50px;" type="text"/></p>	<p style="text-align: center;">CARTONS PER</p> <p>Minute: <input style="width: 50px;" type="text"/></p> <p>Hour: <input style="width: 50px;" type="text"/></p> <p>Shift: <input style="width: 50px;" type="text"/></p> <p>Day: <input style="width: 50px;" type="text"/></p>
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<p>Comments/Recommended Machine <input style="width: 100%; height: 20px;" type="text"/></p>	<p>Completed By <input style="width: 60%; height: 20px;" type="text"/> Date <input style="width: 20%; height: 20px;" type="text"/></p>
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