

Your Source for Packaging Machinery and Supplies

Carton Sealer Application Survey Form

End User Company Name Address				Dealer Company Name		
				City State ZIP		
Contact Name				Contact Name		
Title				Tolophone N	<u> </u>	
Telephone No				Telephone No		
E-mail				E-mail		
	Length	Width	Height	Weight	% of Production	Carton Status
						Filled
H						Under Filled
						Over Filled
						Re-Used
< W						Sample Cartons Sen
						Yes No
If the carton is not R.S.C what t Application requires carton to I	_	_		Top only	Bottom only	
Application requires: cart	on passing	through wi	ith no TAP	E Ta	pe bottom only	
Tape needs to be: 2" (48mm	n) 3" (7	72mm) [other _			
What is the product or products	s being plac	ed in the ca	rton?			
For fully automatic application need to be well scored, with	ons it is the proper glu	e responsil e joints, ar	bility of th	e end user to larger slots.	o inform their corru	gator that the cartons
Carton sealer needs to be:	-	r Fed (Sem r Free (Full		,	justable(Uniform) ndom	
•				Cartons per Shift		
Cartons per Hour Cartons per Day						
Conveyor Height:	Infe	eed Conve	yor Powe	red Ex	xit Conveyor Power	red
Flow Direction Standing In F	ront of Ele	ectrical Bo	x: Right	Γο Left (Stan	dard) Left 1	Γο Right
Electrical Requirement:	_Volt	Phase		Air Available	Psi	
Packing Room Temperature:	Pacl	king Room	Conditio	ns: Norma	al Wet Dus	ty Corrosive
Model Recommended:						
Comments:						
Survey Completed by:					Date:	
Return Form to:						