



## Tray Sealer Application Survey Form

### End User

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Title \_\_\_\_\_  
Telephone No. \_\_\_\_\_  
Fax \_\_\_\_\_  
E-mail \_\_\_\_\_

### Dealer

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Contact Name \_\_\_\_\_  
Title \_\_\_\_\_  
Telephone No. \_\_\_\_\_  
Fax \_\_\_\_\_  
E-mail \_\_\_\_\_

1. What type of product will the customer be putting in the tray?
2. If it is a cup what is the product?
3. What is the fill volume of the cup if liquid?
4. What is the tray or cup size:? Cup: Diameter x Height
5. Tray: Length x Width x Height
6. If using an automatic unit does the customer want a cup denester?
7. How many different tray sizes will customer have?
8. Will customer need additional tooling?
9. What speed do they need to seal the tray at?

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10. Will the customer want to gas flush the tray?

11. How many cavities do they want to run at one time?

- (A) 1 cavity
- (B) 2 cavity
- (C) 4 cavity

12. What type of material is the tray?

- (A) CPET
- (B) APET
- (C) Other

13. What type of lidding film will be used?

14. What type of seal does customer want on container?

- (A) Easy Peel
- (B) Lock Seal

15. Does customer have a budget for this project?

16. What stage of the sales cycle is this project in?

- (A) Selecting a vendor
- (B) Requesting a quote
- (C) Submitting for approval
- (D) Funds already approved

17. What time frame do you have for getting a machine in place?

18. Do you have a budget for this project?

19. What stage of the sales cycle is this project in?

- a. Selecting a vendor
- b. Requesting a quote
- c. Submitting for final approval
- d. Funds already approved

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