

## PRESS QUOTE REQUEST FORM

## CONTACT INFORMATION

Name:										Pł	none	No:				
Email:							Con	npany Na	me:							
GENERAL PRESS INFORMATION																
PRESS TY	PE (CIRCLE (	one <b>):</b>	FL	EXO	GRAV	URE	OTHER	FORMAT	(CRICLE	ONE):		FLEXC	)	GRAVURE	OTHER	
NO. OF DECKS:								LINE SPE	ED MIN	I./MA	X:					
WEB WIDTH MIN./MAX:									PRINT WIDTH MIN.							
REPEAT MIN./MAX:								WEB TENSION (PLI)								
REGISTRATION REQUIRMENTS: NONE MANUAL AUTO OTHER																
DRIVE:	A	C (GEAF	≀ED)	SERVO	IF SER	VO, INC		D. OF AXES	S PER D	ECK:	1	2	3			
ANILOX R	OLL:		MECHA	NICAL	LASER	LINE S	CREEN:		vo	LUME	:					
SUBSTRA	SUBSTRATE: FILM PAPER					BOARD	OTHER	BASIS WE	IGHT:							
FLUID:	W	ATERBAS	SE SC	OLVENT	UV	EB O	THER P	H LEVEL:								
OPTIONS																
FLUID TRANSFER: REVERSE ANGLE DOCTOR BLADE SYSTEM TRAILING BLADE FOUNTAIN ROLL																
SLEEVE EXCHANGE:			PLATE	ANI	LOX	BOTH	NONE	CIRCUM	FERENT	IAL RE	GIST	RATION	J:	MANUAL	ELECTRIC	NONE
SIDELAY:		MANU	JAL E	LECTRIC	с нүс	DRAULIC	NONE	SUNDAY	DRIVE:		ELEC	FRIC	HYD	RAULIC		
WEB DEF	ECT DETEC	CTION:		١	ES N	O FLU		RIBUTION:	CEN	NTRIFU	GAL	PERISTA	ALTIC	DIAPRHAG	M OTHER	NONE
WASH UP SYSTEM:			YES	5 NO												
INSTALLATION:			YES NO SHIP TO ZIP C			CODE:										
REMOTE	SYSTEM N	ΙΟΝΙΤΟ	)RING:	:	YE	ES NC	)									
DRYING																
FINAL DR	YING FOR	MAT:		FO	RCED AI	R UV	IR E	B MAX TE	MP RAN	NGE:						
INTERSTATION DRYING FORMAT: FORCED AIR UV IR EB MAX TEMP RANGE:																
ADDITIC	ADDITIONAL INFORMATION:															

Fill in all applicable fields to the best of your knowledge and return to <u>sales@printco-industries.com</u> or fax to: 920-865-3624

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