

OMNi-4000 Wrapper Pre-Installation Site Survey

Date:	RLWS/Ishida Representative:		
Distributor:	End User Customer:		
Address:	Address:		
Store Type:	<input type="checkbox"/> Chain <input type="checkbox"/> Independent <input type="checkbox"/> Food Processor <input type="checkbox"/> Other: _____		
Products Wrapped:	<input type="checkbox"/> Meat/Poultry <input type="checkbox"/> Seafood <input type="checkbox"/> Produce <input type="checkbox"/> Cheese <input type="checkbox"/> Other: _____		
Film Type Manufacturer:	<input type="checkbox"/> Pliant Omni <input type="checkbox"/> AEP/Borden <input type="checkbox"/> Filmco <input type="checkbox"/> Other: _____ <input type="checkbox"/> Anchor* <input type="checkbox"/> Selectwrap* *NOT RECOMMENDED		
Size(s):	<input type="checkbox"/> 14" <input type="checkbox"/> 15" <input type="checkbox"/> 16" <input type="checkbox"/> 17" <input type="checkbox"/> 18" <input type="checkbox"/> 19" <input type="checkbox"/> 20" <input type="checkbox"/> 21" <input type="checkbox"/> 22" <input type="checkbox"/> 23" <input type="checkbox"/> 24" <input type="checkbox"/> 350mm <input type="checkbox"/> 400mm <input type="checkbox"/> 500mm <input type="checkbox"/> Other: _____		
Tray Size/% product	<input type="checkbox"/> 1S _____% <input type="checkbox"/> 2 _____% <input type="checkbox"/> 2S _____% <input type="checkbox"/> 4 _____% <input type="checkbox"/> 4S _____% <input type="checkbox"/> 4D _____% <input type="checkbox"/> 4P _____% <input type="checkbox"/> 7S _____% <input type="checkbox"/> 8S _____% <input type="checkbox"/> 8D/P _____% <input type="checkbox"/> 9L/H _____% <input type="checkbox"/> 10S _____% <input type="checkbox"/> 10K _____% <input type="checkbox"/> 12S _____% <input type="checkbox"/> 16S _____% <input type="checkbox"/> 17S _____% <input type="checkbox"/> 20S _____% <input type="checkbox"/> 25SH _____% <input type="checkbox"/> 27 _____% <input type="checkbox"/> 10x14 _____% <input type="checkbox"/> 20K _____% <input type="checkbox"/> 22K (10 LB) _____% <input type="checkbox"/> Other: _____% <input type="checkbox"/> Other: _____% <input type="checkbox"/> Other: _____%		
NOTE: Tray percentages are used to determine film sizes.			
Communications Type:	<input type="checkbox"/> Ethernet-Wired <input type="checkbox"/> Ethernet-Wireless <input type="checkbox"/> None		
Scale Management Software:	<input type="checkbox"/> SLP <input type="checkbox"/> PLUM <input type="checkbox"/> InterScale <input type="checkbox"/> None <input type="checkbox"/> Other: _____		
PLU File Supplied:	<input type="checkbox"/> ASCII Text File <input type="checkbox"/> Hardcopy <input type="checkbox"/> Both (preferred) <input type="checkbox"/> None <input type="checkbox"/> Other: _____		
Minimum Room Temperature:	_____ <input type="checkbox"/> F <input type="checkbox"/> C		
Minimum Doorway Width:	_____ <input type="checkbox"/> inch <input type="checkbox"/> cm (Minimum*: 36", Mid-range**: 44.5", Standard: 52.5")		
Space Available:	_____ Long x _____ Wide (Minimum: 7.5 ft L x 8.25 ft W)		
Package Return Direction:	<input type="checkbox"/> 90° ("L") <input type="checkbox"/> Straight out		
Packages per Day:	_____		
Typical Hours of Wrapper Operation:	_____ <input type="checkbox"/> AM <input type="checkbox"/> PM to _____ <input type="checkbox"/> AM <input type="checkbox"/> PM		
Weight Range of Packages:	_____ to _____ <input type="checkbox"/> lb <input type="checkbox"/> kg (Maximum: 12 lb)		
Maximum Package Height:	_____ <input type="checkbox"/> inch <input type="checkbox"/> cm (Maximum: 5.1 inch)		
Maximum Package Size:	_____ Tray _____ Height <input type="checkbox"/> inch (Maximum: 5.1 inch)		
Options:	<input type="checkbox"/> 5 foot <input type="checkbox"/> 3 foot Pack Off Table <input type="checkbox"/> POP Label Dispenser <input type="checkbox"/> Wash Down Cover <input type="checkbox"/> 2 foot Transition Roller <input type="checkbox"/> Rotary Tub <input type="checkbox"/> Conveyor Overflow Sensor <input type="checkbox"/> 5 foot <input type="checkbox"/> 3 foot Gravity Conveyor <input type="checkbox"/> Other: _____		
Countertop Scales Used:	<input type="checkbox"/> Ishida <input type="checkbox"/> Hobart <input type="checkbox"/> Toledo <input type="checkbox"/> DIGI <input type="checkbox"/> TEC <input type="checkbox"/> Berkel <input type="checkbox"/> Bizerba <input type="checkbox"/> Other: _____		
Model(s):	_____		
Label Type:	<input type="checkbox"/> Standard (Stock) <input type="checkbox"/> Custom <input type="checkbox"/> Pre-Printed Safe Handling		
Size:	_____ mm Long x _____ mm Wide Comments: _____ (Specifications: Core I.D. = 3", Roll O.D. = 9" maximum)		
Voltage (3-Phase AC):	<input type="checkbox"/> 200V <input type="checkbox"/> 208V <input type="checkbox"/> 220V <input type="checkbox"/> 240V <input type="checkbox"/> Other: _____		
Circuit: (20A min.)	<input type="checkbox"/> Dedicated <input type="checkbox"/> Shared with: _____ <input type="checkbox"/> Unknown		
Equipment Replaced:	<input type="checkbox"/> Hand Wrap Station <input type="checkbox"/> Semi-Automatic Wrapper <input type="checkbox"/> Automatic Wrapper <input type="checkbox"/> New Installation		
Make/Model of Replaced Equipment:	_____		
Frequent Shopper	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Miscellaneous Comments:	_____ _____ _____		

* Remove: Infeed conveyor, Exit conveyor, Heater conveyor, Touch Screen console, and E. Stop switch.

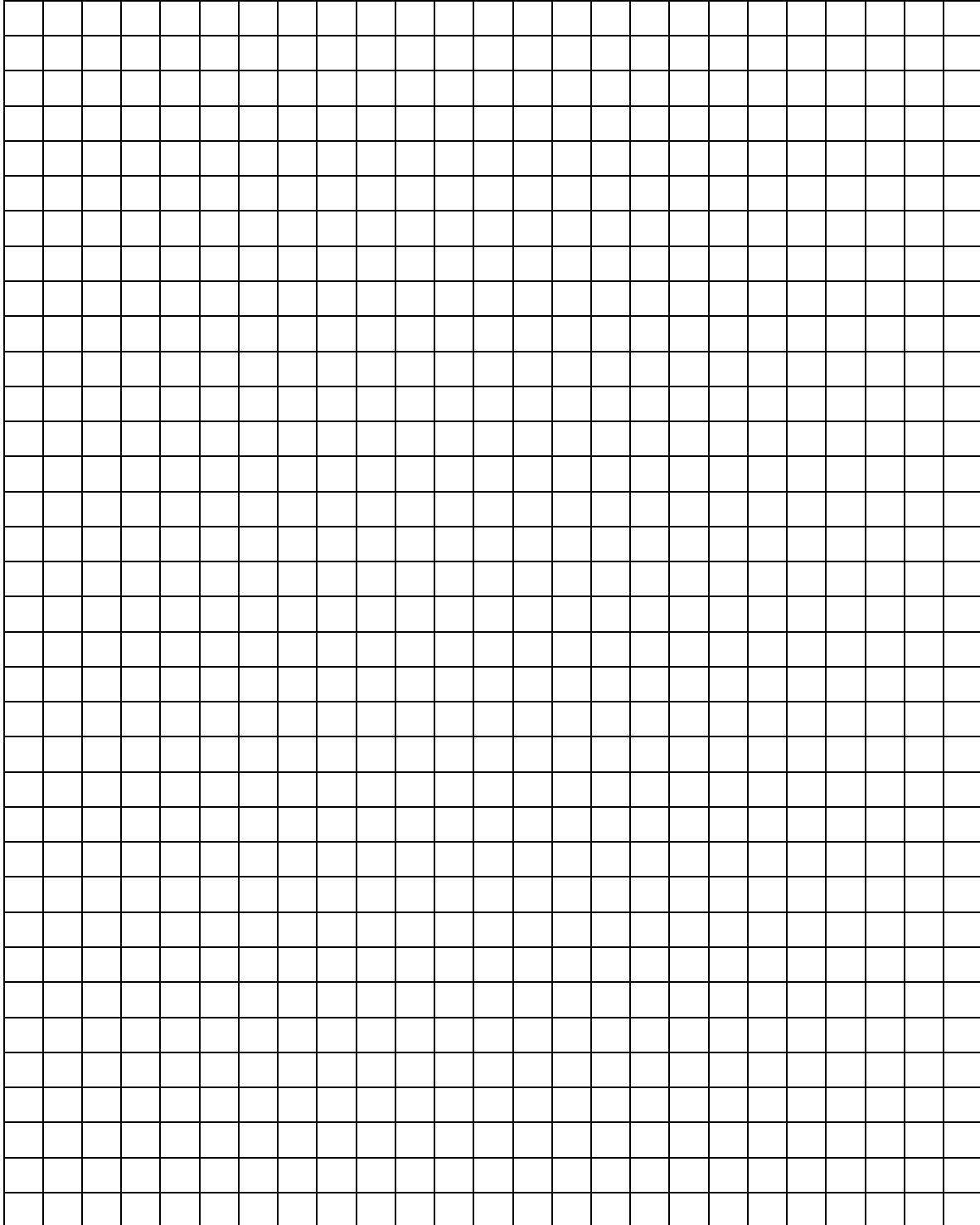
** Remove: Infeed conveyor, Heater conveyor front metal cover and plastic cover.

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Please sketch the Meat Room Layout. Include OMNi-4000 and all peripheral equipment.

- OMNi-4000: 50" wide x 52" deep [4' 2" x 4' 4"]
- Pack Off Table: 5' x 1.5' or 3' x 1.5'
- Transition Roller: 2' x 1'
- Free standing Gravity Conveyor 5' x 1.5' or 3' x 1.5'
- Rotary Tub: 28" dia. [2' 4"]

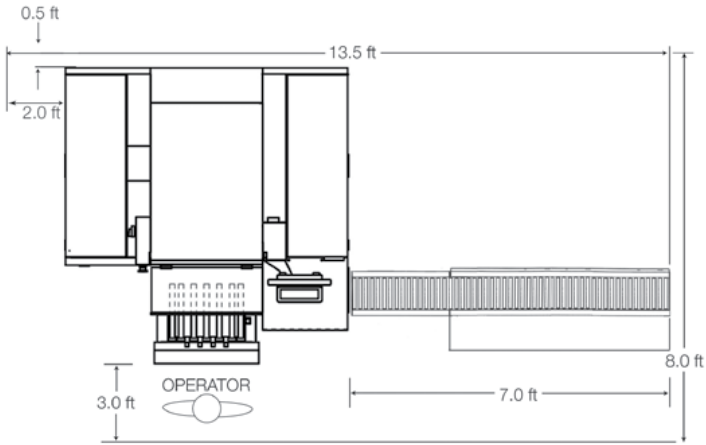
Scale: 1 square = 1 foot



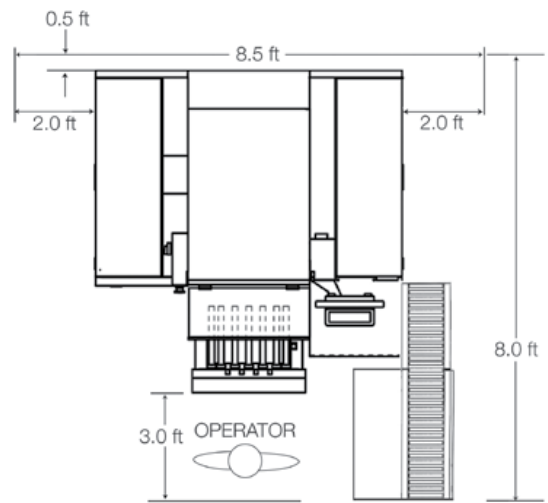
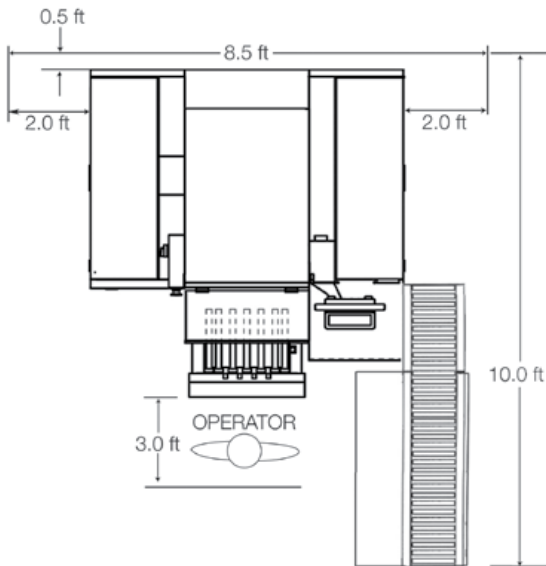
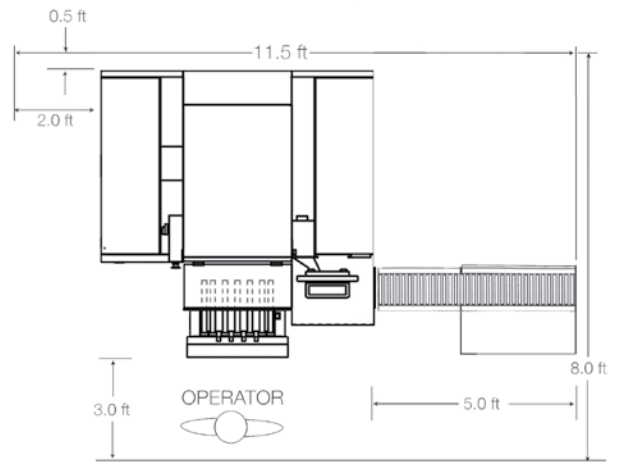
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Accessory configurations

5-Foot Table



3-Foot Table



Rotary Bin

