

# Label Machine Survey

Please complete this form with as much detail as possible and return to:

**Rice Lake Weighing Systems**  
**230 West Coleman Street**  
**Rice Lake, WI 54868**  
**www.ricelake.com**

**RLWS Contact:** \_\_\_\_\_  
**Phone: 715-234-9171**  
**Fax: 715-234-6967**  
**E-mail: sales@ricelake.com**

LMS#: \_\_\_\_\_  
 Date Received: \_\_\_\_\_  
 Routed To: \_\_\_\_\_  
 Date: \_\_\_\_\_

- Firm Quote       Budgetary Quote  
 Pre-Printed Label     Print and Apply Label

Customer: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Fax: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Contact: \_\_\_\_\_ Machine Sales: \_\_\_\_\_  
 Title: \_\_\_\_\_ Label Sales: \_\_\_\_\_

## 1.0 Labeling Requirements

Application Type:     Top       Bottom       Front/Back       Wrap       Other  
 If other please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Condition of Product:     Empty       Filled       Capped       Filled Capped       Hot  
                                    Cold       Dry       Wet

Condition 2:             Empty       Filled       Capped       Filled Capped       Hot  
                                    Cold       Dry       Wet

Geometry of Product:     Flat       Curved       Tapered       Recessed       Concave  
                                    Convex

Print & Apply Label:     Yes       No      Pre-Printed Label:     Yes       No

Product Brand Name: \_\_\_\_\_

Product Dimensions

Product#	Size	Height	Width	Depth	Shape <small>(Round, Square, Rectangle, Oval, Other)</small>
1					
2					
3					
4					
5					

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## Label Dimensions

Product#	Length (around)	Width (across)	Copy Position <small>(OR, OL, OT, OB, OR/OL, OT/OB)</small>

OR-Orientation-Right, Orientation-Left, Orientation-Top, Orientation-Bottom, Orientation-Right/Orientation-Left, Orientation-Top/Orientation-Bottom

Material:  Paper  Film      Specifics: \_\_\_\_\_  
 Surface Treatment:  None  Over/Laminate  Varnish  Imprintable Varnish  
 Specifics: \_\_\_\_\_  
 Adhesive:  Permanent  Removable  Special      Specifics: \_\_\_\_\_

## 2.0 Application Requirements

Application Rate: \_\_\_\_\_ Minimum \_\_\_\_\_ per minute      \_\_\_\_\_ Maximum \_\_\_\_\_ per minute

Tolerance Required: Top to Bottom  +/- 1/32"  +/- 1/16"  +/- 1/8"  +/- 1/4"  +/- 1/2"  
 +/- 1"  Greater than 1"  
 Side to Side  +/- 1/32"  +/- 1/16"  +/- 1/8"  +/- 1/4"  +/- 1/2"  
 +/- 1"  Greater than 1"

Usage: Hours per day: \_\_\_\_\_ Days per week: \_\_\_\_\_

Describe product spacing and distance between products: \_\_\_\_\_

Process before labeling: \_\_\_\_\_

Process after labeling: \_\_\_\_\_

Imprinting required:  Hot Stamp  Thermal Transfer  Ink Jet

## 3.0 Conveyor Data

Fixed Speed: \_\_\_\_\_ Products per minute      \_\_\_\_\_ Line speed in inches per minute

Variable Speed: Products from \_\_\_\_\_ to \_\_\_\_\_      Line speed from \_\_\_\_\_ to \_\_\_\_\_

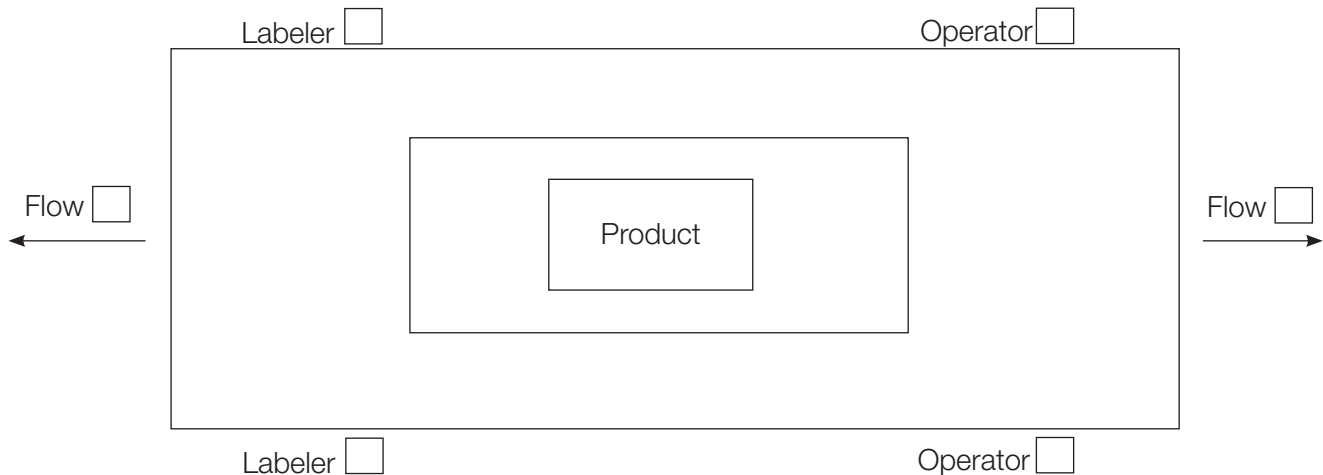
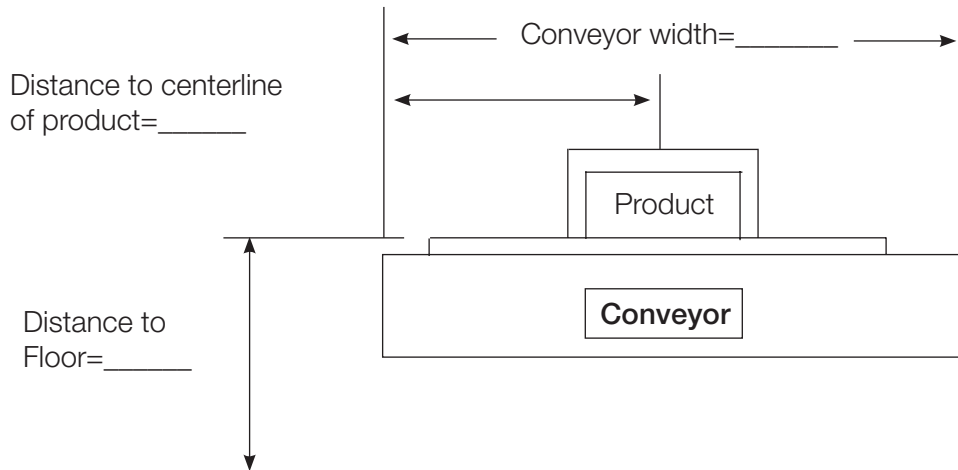
Type of Conveyor:  Rex Chain  Belt  Stainless Steel  Other

Conveyor Motion:  Continuous  Intermittent      Dwell Time= \_\_\_\_\_

How do we discharge product after labeling: \_\_\_\_\_

Minimum distance between products is: \_\_\_\_\_

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## 4.0 General

How will product be fed to the labeling system?  Conveyor  Manually

If conveyor, how?  End Transfer  Right Side Transfer  Left Side Transfer  Other

Describe Other: \_\_\_\_\_

Provisions for discharging product after labeling: \_\_\_\_\_

Equipment will be installed in what country? \_\_\_\_\_

Customer's Price Range: \_\_\_\_\_

Competition: \_\_\_\_\_

Describe available electrical utility?  110v-1 phase  220v-1 phase  220v-3 phase  440v

Describe available air utility: \_\_\_\_\_

Can we receive pictures of labeling area? \_\_\_\_\_

Where are the product samples? \_\_\_\_\_

Where are the label samples? \_\_\_\_\_

Requested delivery schedule: \_\_\_\_\_

Comments: \_\_\_\_\_