

Quotation Request

Customer Information				
Company Name:			Date:	
Address:				
			Rep:	
Telephone:			Fax:	
Contact Person:			Title:	
Container Specifications:				
Container Type (glass, metal, plastic)	1	2	3	4
Capacity (metric or oz, pint, quart/liter)				
Container Height				
Container dia. / WxD				
Neck finish (O.D.)				
Neck Inside dia. (I.D.)				
Product Specifications				
Product Name/Type				
Product Viscosity (CPS)				
Product Foaminess				
Product Temperature				
Other (corrosive, etc)				
Type of Fill Volumetric or level fill				
Contact Parts				
Other Specifications				
Fill Speed				
Conveyor Chain (Delrin, S/S)				
Conveyor height				
Product travel				
Voltage/Ph./Hz.				
Explosion Proof				
Additional Information (Please include sketch if samples are not included):				