Custom Label Quote Request

CUSTOMER INFORMATION:

Customer Name _____

Contact _____

❑New Order ❑Repeat Order

Address _____

City _____ State _____ Zip _____

Phone _____

Fax _____

ASAP Quote # _____

QUANTITY:

This section MUST be completed before your label can be quoted.

All custom preprinted and blank label quotes may include +/- 10% of the total quantity ordered.

Quantity to Quote _____

Projected Usage: Monthly _____ Yearly _____

LABEL DESIGN:

Label Size: Width _____ Height _____ No. Across _____

Perforation: ❑Vertical ❑Horizontal ❑No Perf

Supply In: ❑Roll ❑Fanfold

Roll Dimensions: OD _____ Core ID _____

Sensor Mark: ❑No ❑Yes Location: _____

Printer Using: _____

Preprinted Labels:

No. of Colors _____ Artwork Attached _____

Describe intended use of label as specifically as possible

Sketch your custom label or tag above.
Indicate: Position of copy and logo art, upper and lower case, relative size, borders, colors, perforations

FAX: (715) 234-6967

MATERIAL SELECTION:

❑GreatLabel TTL ❑GreatLabel DTL
❑GreatLabel DTL-IR ❑GreatTag TTT
❑Kimdura ❑GreatTag DTT
❑GreatLabel DTL-SYN ❑FanTastock (Polyester)
❑GreatLabel DTL-Plus
❑Other _____

ADHESIVE:

❑Permanent ❑Removable
❑Opaque ❑Ungummed

APPLICATIONS:

Substrate applied to:
❑Corrugated ❑Paper ❑Metal
❑Wood ❑Plastic ❑Glass
❑Other _____

Surface Texture:
❑Flat ❑Curved ❑Smooth ❑Rough

Surface Condition:
❑Dry ❑Wet ❑Clean ❑Oily
❑Other _____

Applied By:
❑Hand ❑Automatic Applicator ❑Semi-Auto

Substrate Temperature:
❑Room Temp + 50°F to 75°F (10 to 24°C)
❑Chilled +35° to 50°F (2 to 10°C)
❑Other _____

ENVIRONMENTAL CONDITIONS:

Used: ❑Indoors ❑Outdoors
Exposed to: ❑High Humidity ❑Moisture
❑Chemicals ❑Oils

Temperatures labels subjected to on product: _____

Expected label life: _____

APPROVALS:

Salesperson Signature _____ Date _____

Customer Signature _____ Date _____

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TEL: 800-472-6703 • FAX: 715-234-6967
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