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BASIC SHRINK SLEEVE QUOTE REQUEST INFO:

	Customer name:	Project name.	
1)	Size of sleeve flat, unglued: width across web	X width along web_ve to opposite open end of sleeve 2	nd)
2)	Size of seam overlap area:(how much material overlaps at the seam.)		
3)	Finished final size after folding and seaming and ready to apply to your product: X		
4)	Container type that sleeve is applied to:	(plastic resin type,	glass, metal, etc.)
5)	Conditions of labeling environment if not dry, clean, and ambient temp:(very important to know about freezing, chilling, or high heat temp ranges; condensation; or any fluids or contaminants)		
6)	Shrink sleeve material:	(most common choices are OPS, PVC, or PETG)	
7)	# of ink colors: # of art versions:	(please attach or include an art f	ile for most accurate quote
8)	Special varnish or surface coating: (choice of none gloss varnish matte varnish textured varnish)		
9)	Rolls or cut pieces? If rolls, maximum outside diameter of roll: (either in quantity or inches—12" outer diameter rolls are most common)		
10)	Core size:		
11)	Unwind position: (see unwind chart attached #1 thru #4 are 99+% most common)		
12)	Total quantity per order:		
	Total quantity to be inventoried:		
	Total quantity per year:		
13)	Applying by hand or with an auto-applicator?	Make:	Model:
14)	Payment terms desired:	(debit card, credit card or Net 30 day	s are standard)
	nportant to please let us know if you require anything lis	sted below—Yes or No:	
Very ın			
very in	 Special hox case or pallet pack-outs or dimensions 	s Describe:	
Very in	special box, case, of pariet pack-outs of difficults		
Very in	• Special color approvals such as GMI or Delta E:		
Very in	• Special color approvals such as GMI or Delta E:	DA, ISO or CE:	