

BULK PALLETIZER/DEPALLETIZER INFORMATION DATA SHEET

COMPANY _____ **DATE** _____ **NUMBER OF MACHINES REQUIRED** _____
ADDRESS _____ **PHONE NUMBER** _____ **FAX NUMBER** _____
CITY, STATE, ZIP _____ **CONTACT NAME** _____

Brief Description Of Product And Operation: _____

DEPALLETIZER DATA

Please indicate type of machine required: **AUTOMATIC** **SEMI-AUTOMATIC** **HI-LEVEL DISCHARGE** **LOW-LEVEL DISCHARGE**

Desired Pallet Infeed Conveyor Elevation: _____

Desired Container Discharge Conveyor Elevation: _____ **Number Of Machines Required:** _____

PALLETIZER DATA

Please indicate type of machine required: **AUTOMATIC** **SEMI-AUTOMATIC** **HI-LEVEL INFEEED** **LOW-LEVEL INFEEED**

Desired Pallet Discharge Conveyor Elevation: _____

Desired Container Infeed Conveyor Elevation: _____ **Number Of Machines Required:** _____

UTILITIES: ELECTRICAL - VOLTAGE: _____ **PHASE:** _____ **Hz:** _____

Container Type *	Full Or Empty	Container Ref. **	CONTAINER DIMENSIONS					Pallet Size / Type ***	Layer Pattern	Layers Per Pallet	Production Line Speed
			Height	Diameter	Square	Rectangular	Oval				
1						L	W				
2						L	W				
3						L	W				
4						L	W				
5						L	W				
6						L	W				
7						L	W				
8						L	W				

* Glass, PET, Fiber, Metal, Plastic or Other
 ** Enter XX Ounces or XX ML or Container Print Number or Other Reference
 *** Pallet Type - (See Attachment).

Please furnish bottle samples and/or full scale drawings. Please furnish scale layout or dimensioned sketch of area if available.

