

PRODUCT RECOMMENDATION SHEET Fax to 877-637-3259



CUSTOMER _____ PHONE _____
 ADDRESS _____ CONTACT _____
 CITY/STATE/ZIP _____ POSITION _____

WATER TYPE DI RO TAP CITY WELL
 circle all that apply
 pH _____ COND _____ HARDNESS _____

PRESS INFO Sheetfed WEB NEWS HEATSET COLDSET BUSINESS FORMS
 circle all that apply
 Manufacturer/Model _____

DAMPENING SYSTEM CONV BRUSH SEGREGATED
 circle all that apply SPRAY DUOTROL INTEGRATED
 OTHER _____

Ink & Water Set points and ratios if applicable
ink C M Y K

water _____

RECIRCULATION ROYSE/BALDWIN CENTRAL NONE
 circle all that apply OTHER _____

PLATES METAL POSITIVE NEGATIVE CONV. THERMAL PHOTOPOLYMER
 circle all that apply VIOLET SILVER POLY LASER PREBAKED POST BAKED
 Manufacturer/Model _____

INK Conventional HUV LED EB UV SOY
 Manufacturer/Series _____

STOCK COATED UNCOATED BOARD PLASTIC FOIL SC-A/B
 circle all that apply ACID ALKALINE
 OTHER _____

CURRENT FOUNTAIN SOLUTION
 CONCENTRATE NAME/DOSAGE _____
 SUBSTITUTE NAME/DOSAGE _____
 ALCOHOL & ADDITIVES NAME/DOSAGE _____
 pH _____ conductivity _____

ANY CURRENT PROBLEMS, CONCERNS, or PERFORMANCE REQUESTS

