



Packaging Dynamics, Ltd.

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Quote Data Sheet



Please fill out the entire form for all information that applies.

Date: _____

Company: _____

Address: _____

Contact: _____

Phone: _____ Fax: _____

E-Mail Address: _____

Machine Type (Circle) : Rotary, Inline, Portable

Electrical Supply (Circle) 110 VAC / 220 VAC

Filler, Flow Meter, Piston, Unscrambler & Accumulator Tables, Conveyors, Other- _____

Hazardous Construction Required (Yes/No): _____

Nema 4 Electrics (Yes/No): _____

Type of Liquids to be Filled: _____

Expected Hours of Operations per Day: _____

Machine Direction: (left to right) or (right to left)

Are There Any Room Restrictions (Yes/No): _____

Conveyor Chain Type & Width: _____

Explain- _____

Preferred Pump Type: _____

Container Style (Rnd/F-Style/ Square)	Product Description	Container Size (oz/liter)	Container Opening Inner Diameter	Filling Speed (CPM)	Remarks or Comments

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