

RETROFIT APPLICATION DATA FORM

Date:	Customer Name:
Distributor Name:	Contact:
Contact name:	Address:
Location:	Phone #:
Phone #:	Fax #:
Fax#:	Email:
Email:	
Machine Serial # (required)	
Has the machine been retrofitted in the past?	NO
If yes, please describe:	
Description of Retrofit Requirement:	
Expecation of machine operation after installation of ref	trofit:
Will you need instruction on how to install the retrofit?	YES NO
If yes, will you need step by step detailed instructions or overview of how the installation should take place?	a general Step by step General Overview



STAND-A-LONE OPTIONS Example: Top Sheet Dispenser, Film Sealer, Top Platen)

Voltage requested?	Conveyor RPM requested?	
Pass height requested?	What is the PLC of the Host machine?	
Ceiling height?	Minimum load size?	
Electrical or Mechanical hoist?	Maximum load size?	

INFO REQUIRED FOR CONVEYOR REQUESTS

Length	Eff Width	Pass H	leight	Roller S	pacing	Speed	Loca	ition
-								

Load will be conve	yed on:	Load	d weight:		
Pallet:	Slip Sheet:	No Substrate	: Pallet Type:		
Postal Pallet:	Pallet &	Slipsheet:	Other:		
Bottom boards on	pallets will be:				
how			and the second second		
Perpendicular wi	th conveyor rollers	Parallel with re	ollers		
		# of bottom bo			
		Width of each:			
OTHER REQUIRI	EMENTS:				
Are Logic/HMI modificat	ions needed: YES	NO UNSURE			
If yes, a copy of the current	تعصی machine logic/HMI files must ا	be sent to Lantech. Orders v	will not be processed without this information.		
Paint color: STD La	ntech Blue Other - Pa	aint Chip or RAL # Required	d		
Is there other equipmen	t that will be operated/cont	rolled by the wrapper? (ie	e: Scale/Labeler) Please describe.		