



BPX TESTING

Request Form

RSM Name:

Date:

DEAL ID:

DISTRIBUTOR:

Name of Contact

Phone Number

Email Address

Address

END USER:

Name of Contact

Phone Number

Email Address

Address

MACHINE TYPE:

- Shrink Poly Bundler Flow Wrapper
 Conveyor Stretch Wrapper Steam Tunnel
 Ink Jet Coder Labeler Other:

Model Number:

Desired Throughput:

 product per minute

DESIRED RESULTS:

(what exactly needs to be accomplished)

FILM:

Is film provided by customer for demo?

- Yes No (if checked, fill out below)

If no, please provide film information below:

- Use any applicable film
(if checked, leave below blank)

- Materials: POF PE
 BOPP PET/PVC
Type: Crosslink Multilayer
 Plain Printed

Film Gauge (Thickness):

Will product sample be provided by customer?

- Yes No

Materials available 2 days before demo?

- Yes No

Desired machine confirmed in stock at BPX?

- Yes No

MEETING INFORMATION:

- Video Recorded Live Teams Facetime Meeting

Save Samples: Yes No

Will there be guests present during the demo: Yes No

Required Test Date or Completion Date:

PLEASE SEND SAMPLES TO: 1425 S. CAMPUS AVE., ONTARIO CA 91761