

Enquiry Form MOF-PROMO

FAX + 49 7150 928-212 / mailto:alfalas@tampoprint.de

Contact Details

Company Name _____ Contact Person* _____

Sector _____ Position* _____

Street _____ Phone* _____

Postal Code _____ Fax* _____

City _____ Mobile* _____

Country _____ E-Mail* _____

yes, newsletter Internet _____

Customer number

Project

Note on data protection *

TAMPOPRINT® AG assure you that your details will be handled confidentially in line with the data protection regulations:

YES

"I agree that my details may be used for the purpose of support, sending of product information and the submission of service offers as well as for market research purposes by the TAMPOPRINT® AG and companies belonging to the TAMPOPRINT® Group. The dissemination to third parties with the exception of affiliated companies of TAMPOPRINT® AG and the TAMPOPRINT® trading organisation as well as to agencies entrusted with the customer care is excluded. By informing you about my email address and/or mobile phone number I agree to receive by email and/or SMS customer information from the TAMPOPRINT® Group or the TAMPOPRINT trading organisation and to receive phone calls for this purpose."

On request you can receive information about your details saved at TAMPOPRINT® AG and can ask for rectification, deletion or blocking of the details. Should you object to the processing of your details by hindsight, you can revoke your consent for future dissemination at any time by email: marketing@tampoprint.de or by phone: +49 7150 928-0.

Electric requirements

Frequency 50 Hz 60 Hz

Power supply voltage _____

Network configuration European non-European

Transformer required yes no Supplier transformer _____

Machine requirements

Inline/Offline Inline Offline
 Height of in feed: _____ mm Height of outlet: _____ mm

Feeding direction from right left

Extension vacuum conveyer* yes no

Counting device (change box) yes no

Counting signal for good parts yes no

Feeding system yes no

Feeding capacity per min. _____

Hopper yes no

Conveyer yes no

External liquid cooler yes no

*urgent with camera inspection system
 Precision ± 5 pcs. ± 50 pcs.

Volume _____ Litre

if no, requirements known

Beverage caps

Size 28 mm 38 mm 48 mm Other

Material PP PE Liner Crown corks

Using laser additives yes no

Marking position internal outside (on top)

Camera inspection system

Test criteria checked (If not, the camera inspection system checks if the marking exists)

Only check colour of caps. Colour of caps _____

Other

Requirement output capacity (if inline) _____

Send reference sample caps (each type min. 3.000 pcs.)

Date _____ City _____ Signature customer / Stamp _____