

## 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?  YES  NO

If yes, please describe:

Description of Retrofit Requirement:

Expection of machine operation after installation of retrofit:

Will you need instruction on how to install the retrofit?  YES  NO

If yes, will you need step by step detailed instructions or a general overview of how the installation should take place?  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

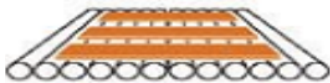
Length	Eff Width	Pass Height	Roller Spacing	Speed	Location

**Load will be conveyed on:** \_\_\_\_\_ **Load weight:** \_\_\_\_\_

**Pallet:** \_\_\_\_\_ **Slip Sheet:** \_\_\_\_\_ **No Substrate:** \_\_\_\_\_ **Pallet Type:** \_\_\_\_\_

**Postal Pallet:** \_\_\_\_\_ **Pallet & Slipsheet:** \_\_\_\_\_ **Other:** \_\_\_\_\_

**Bottom boards on pallets will be:**



Perpendicular with conveyor rollers



Parallel with rollers

# of bottom boards:

Width of each:

## OTHER REQUIREMENTS:

Are Logic/HMI modifications needed:  YES  NO  UNSURE

*If yes, a copy of the current machine logic/HMI files must be sent to Lantech. Orders will not be processed without this information.*

Paint color:  STD Lantech Blue  Other - Paint Chip or RAL # Required

Is there other equipment that will be operated/controlled by the wrapper? (ie: Scale/Labeler) Please describe.

**FLOW CHANGE REQUESTS:** Please provide layout sketch or attach layout drawing with request.