

Estimate # _____ Date _____ Date Wanted _____ Date Received by Estimator _____

Previous Job # _____ Customer _____ Salesperson / Contact Person _____

Size & Style		Printing		Coating		Die Cutting & Special Finishing		Glue	
Size (LxWxH)		<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO		Embossing	Window Patching	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Style		<input type="checkbox"/> 4 Process Special Ink Request		<input type="checkbox"/> WaterBase <input type="checkbox"/> UV Gloss <input type="checkbox"/> UV Matte <input type="checkbox"/> Gloss and Matte <input type="checkbox"/> Soft Touch		<input type="checkbox"/> Registered <input type="checkbox"/> Blind Size (LxW) _____ Positions _____	Size (LxW) _____ <input type="checkbox"/> PET 0.014Mil <input type="checkbox"/> PET 0.02Mil <input type="checkbox"/> Cellulose Acetate 2 Mil <input type="checkbox"/> Other	<input type="checkbox"/> Straight Line <input type="checkbox"/> Auto Bottom <input type="checkbox"/> 4 Corner <input type="checkbox"/> 6 Corner <input type="checkbox"/> Special Style <input type="checkbox"/> Hanger Glue Special Glue Request	
CAD #				Special Coating Request		Foil Stamping			
Item Description		<input type="checkbox"/> PMS <input type="checkbox"/> Conventional <input type="checkbox"/> UV Inks				Size (LxW) _____ Positions _____ <input type="checkbox"/> Flat <input type="checkbox"/> Modelled Foil Color _____			
Paperbaord									
Board Type				Back Side Coating					
Caliper									
Packing		Freight		Estimate Request					
<input type="checkbox"/> Cases		<input type="checkbox"/> Included <input type="checkbox"/> Extra		Quote By Required QTY				Quote By Annual QTY	
<input type="checkbox"/> Bundle		<input type="checkbox"/> LTL		QTY 1 _____ Versions _____				Annual QTY _____	
<input type="checkbox"/> Corner Board		<input type="checkbox"/> Full Truck Load		QTY 2 _____ Other Board 1 _____				Runs / Year _____	
<input type="checkbox"/> Flat on Pallet		<input type="checkbox"/> Picked By Customer		QTY 3 _____ Other Board 2 _____					
<input type="checkbox"/> Pallet				QTY 4 _____ Other Board 3 _____					
<input type="checkbox"/> Recycled 40x48				QTY 5 _____ Note: _____					
<input type="checkbox"/> Brand New 40x48				QTY 6 _____					
<input type="checkbox"/> US Chep				Tooling Cost: <input type="checkbox"/> Included <input type="checkbox"/> Extra Overrun % _____ Underrun % _____					
<input type="checkbox"/> CAD Chep				Storage Request Detail: _____ <input type="checkbox"/> Included <input type="checkbox"/> Extra					
<input type="checkbox"/> Heat-Treated				Payment Term: <input type="checkbox"/> Prepay <input type="checkbox"/> COD <input type="checkbox"/> NET30 <input type="checkbox"/> Other Special Request: _____					
<input type="checkbox"/> Skip Top				Credit Approval : <input type="checkbox"/> YES <input type="checkbox"/> NO Quoted By _____ On _____					
<input type="checkbox"/> Others									