

QUESTIONNAIRE

Thanks for your inquiry. Please fill out this form in order to offer you the suitable model.

We are sure to offer our best service and two-way communication as well.

ITEM	SPECIFICATION	PLEASE SELECT	REMARK
1	NUMBER OF PRINTING COLORS	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 4 <input type="checkbox"/> 6 <input type="checkbox"/> 8	
2	IN-LINE OR OFF-LINE	<input type="checkbox"/> IN-LINE <input type="checkbox"/> OFF-LINE	
3	STANDARD TYPE OR DOCTOR BLADE TYPE	<input type="checkbox"/> STANDARD TYPE <input type="checkbox"/> DOCTOR BLADE TYPE	
4	KIND OF MATERIAL FILM		
5	REPEAT LENGTH RANGE		
6	THICKNESS OF MATERIAL FILM		
7	ONE SIDE PRINTING OR TWO SIDE PRINTING	<input type="checkbox"/> ONE SIDE PRINTING <input type="checkbox"/> TWO SIDE PRINTING	
8	REQUIRED MAX. PRINTING SPEED (M/min)	<input type="checkbox"/> 80 <input type="checkbox"/> 120 <input type="checkbox"/> 150 <input type="checkbox"/> 200 <input type="checkbox"/> 300	
9	MAX. WIDTH OF MATERIAL FILM (mm)	<input type="checkbox"/> 600 <input type="checkbox"/> 800 <input type="checkbox"/> 1000 <input type="checkbox"/> 1250 <input type="checkbox"/> 1500 <input type="checkbox"/> 1600 below	
10	MAX. DIAMETER OF MATERIAL FILM (mm)	<input type="checkbox"/> φ600 <input type="checkbox"/> φ800 <input type="checkbox"/> φ1000 <input type="checkbox"/> φ1200 below	
11	REQUIRED PRINTING QUALITY		
12	PURPOSE OF END PRODOCT		
13	WHAT'S YOU BUDGET		

Please specify in case of specially required specification.

For your more information about our machinery, please visit to our website as below.