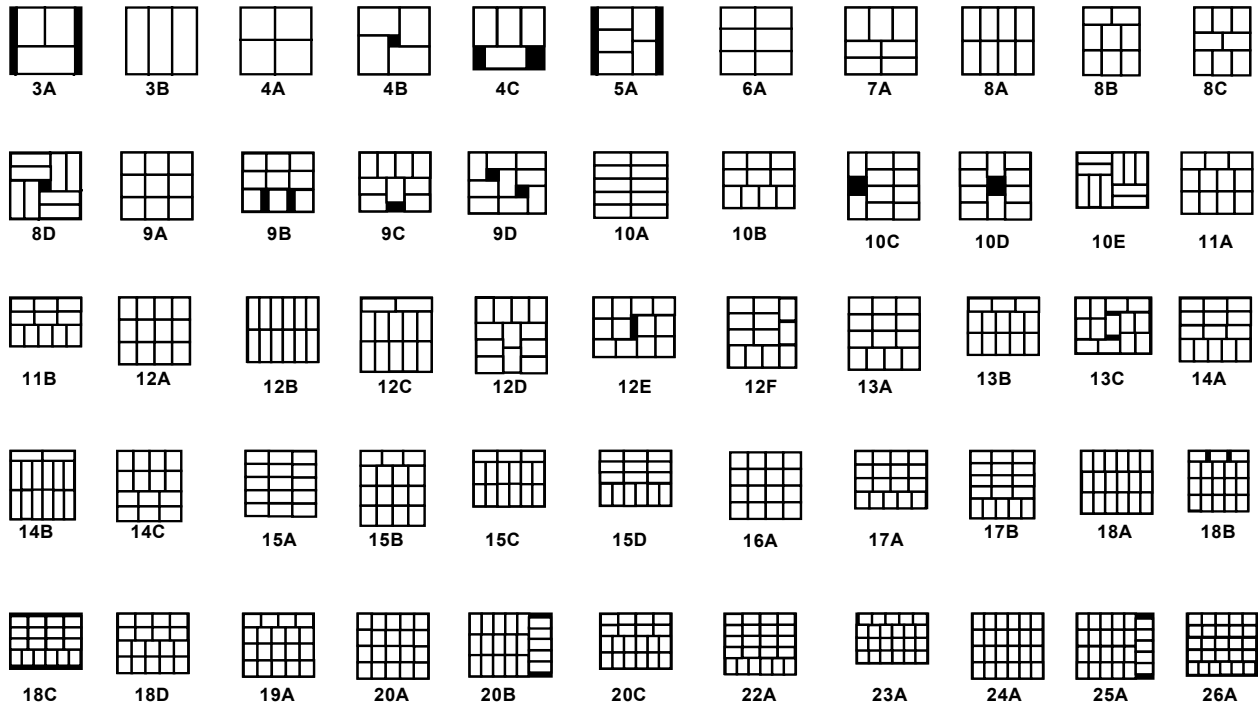


PALLET PATTERN SELECTION CHART



2. Infeed Conveyors

* Number of Infeeds Required _____

Infeeds/Case Positioning Provided By CIM Customer 3rd Party

* Conveyor from Packing Line Required? Yes No

Case Turning Required? Yes No

Double Row Forming Required? Yes No

Bar Code Sortation Required? Yes No

Open Flap Detection Required? Yes No

Existing PLC Available for Conveyor Controls? Yes No

3. Unit Load Removal

* Number of Palletizing Stations Required _____

Build Loads on Conveyor Floor Other _____

Load Removal Conveyor Fork Lift/Pallet Jack
 Other _____

Is Load Stability an Issue? Yes No

Conveyor Soft Start/Stop? Yes No

** Indicates minimum information required for budget quote.*

4. Dunnage Specifications

* Loads Built on: Pallet Slip Sheet
 Sheet on Pallet Load w/out Sheet or Pallet

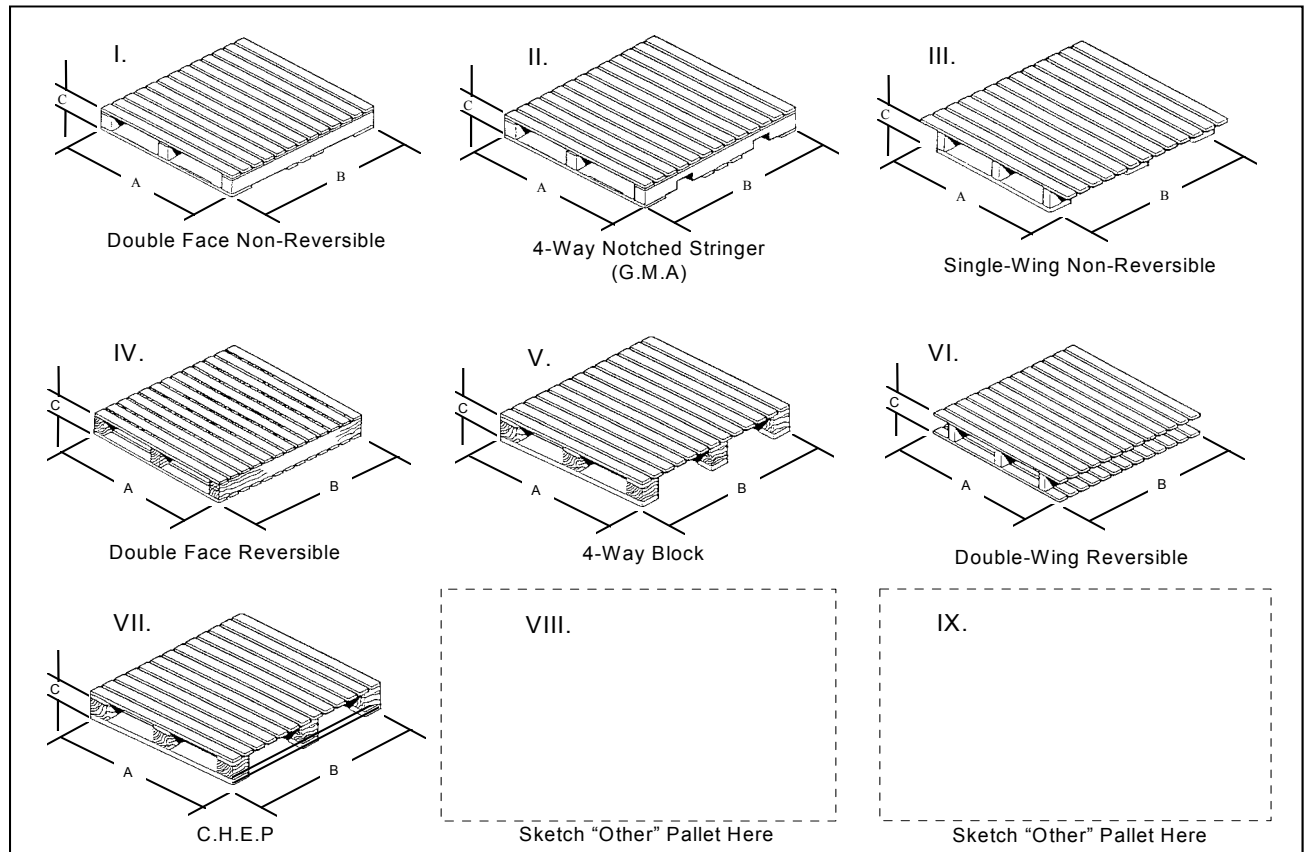
* Indicate Correct Pallet(s) Below or Attach Spec
 (If Pallets are Plastic or Steel, Spec or Dwg is Required)

* Pallet # _____ Width (A) _____ Length (B) _____ Height (C) _____
 Pallet # _____ Width (A) _____ Length (B) _____ Height (C) _____
 Pallet # _____ Width (A) _____ Length (B) _____ Height (C) _____
 Empty Pallet Weight: _____ Pounds

* Pallet Condition New Used Reconditioned Captive

* Handle Pallets from End (A) Side (B) Either

See pallet diagrams on next page



* Bottom/Slip Sheet Required? Yes No
 Material: Corrugated Kraft Plastic Fiber Board
 Plywood Other _____
 Size: Width _____ Length _____ (w/out tabs)
 Tab Length: _____

* Indicates minimum information required for budget quote.

* Tier/Layer Sheets Required? Yes No
Material: Corrugated Kraft Fiber Board Other _____
Size: Width _____ Length _____ (w/out tabs)

* Top/Cap Sheet Required? Yes No
Material: Corrugated Kraft Fiber Board Other _____
Size: Width _____ Length _____ (w/out tabs)

* Trays or Caps Required? Yes No
Position: Bottom Layers Top

5. Stretch Wrapping (If Applicable)

Stretch Wrapper Required? Yes No
Move Load between Palletizer & Wrapper Conveyor Transfer Car
Load Accumulation After Wrapper Powered Gravity None
Number of Loads Accumulation _____
Top Layer Configuration Full Layer Partial Layer
Number of Wraps Around Load _____
Film Web Width 20" 30"
Wrap Slip Sheet Tabs Under Film? Yes No N/A

6. Operating Description & Parameters

Number of Working Days per Year _____
Number of Shifts 1 Shift 2 Shifts 3 Shifts 4 Shifts
Manual Palletizing Backup Required Yes No
Concept sketch attached Yes No
Customer floor plan submitted Yes No
AUTOCAD floor plan submitted Yes No
Preferred CIM pre-engineered layout # _____

7. Palletizer Acceptance

Acceptance at CIM: Yes No
Customer present: Yes No
 30-minute functional run (single product only) - standard
 Other (specify)

* Indicates minimum information required for budget quote.

Acceptance at Customer Site: Yes No

4-hour production run

Other (specify)

8. * Scope of Supply

Palletizer Robot With Product Gripper	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Pallet Gripper	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Programming/Software	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Case Infeed Conveyor(s)	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Pallet Dispenser(s)	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Pallet Exit Conveyors	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Conveyor PLC Controls	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Pallet Floor Locators	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Sheet Rack	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Pallet Rack	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Safety Enclosure	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
Exit Conveyor Safety Eyes	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
_____	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
_____	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party
_____	<input type="checkbox"/> CIM	<input type="checkbox"/> Customer	<input type="checkbox"/> Third Party

Safety Enclosure Type

Welded Wire - Galvanized (Standard)

Other (specify) _____

9. Operator Interface

PanelView 550 (standard)

Teach Pendant

PC

Other (specify)

*** Indicates minimum information required for budget quote.**

10. Information Requirements

- Production Reporting Required? Yes No
- Lot Tracking Required? Yes No
- Error Diagnostics Required? Yes No
- PLC Network Required? DH+ Modbus Other _____
- Host Computer Interface Required? Yes No
- Please Specify _____

11. Miscellaneous Information

Please attach layout drawing, proposed operating description or other information that may help our understanding of your requirements.

Other Requirements not Covered in this Document (list below)

** Indicates minimum information required for budget quote.*