



Cousins Packaging Inc.
 6450 Northam Drive
 Mississauga, Ontario L4V 1H9
 Telephone: 905-678-6655 ~ Toll Free: 1-888-209-4344 ~ Fax: 905-678-3429
 www.cousinpackaging.com

Effective: September 2020

APPLICATION SURVEY FORM for SW-A-Arm, HP3200, 3300 and 4100-FA "ULTRA" Series AUTOMATIC SYSTEMS

Date: _____ Region: _____ Project No: _____

USER / DISTRIBUTOR INFORMATION

Company Name: _____
 Address _____
 City, State, Zip _____
 Phone No. _____ Fax No. _____
 Contact _____ Title _____

Distributor Name: _____
 Address _____
 City, State, Zip _____
 Phone No. _____ Fax No. _____
 Contact _____ Title _____

PRODUCTION REQUIREMENTS

Process Rate:

Rate determined by Forklifts Power Walkies Hand Trucks
 Normal process rate: _____ Loads Per Hour

Production Time Basis:

One shift (8 hours) Two shifts (16 hours) Three shifts (24 hours)
 Average working days _____ per year (annual rate)

PRODUCTION REQUIREMENTS ...Continued...

System Loading/Unloading:

System loading: End-Loaded Side-Loaded Both

System unloading: End-Unloaded Side-Unloaded Both

Is system to match a palletizer or existing conveyors? Yes No

Palletizer discharge conveyor height: _____" (floor to top of discharge rollers)

Palletizer discharge conveyor speed: _____ FPM Fixed? Yes No Variable? Yes No

Is system to match other conveyor? Yes No

Other conveyor pass-line height: _____" (floor to top of rollers)

Other conveyor speed: _____ FPM Fixed? Yes No Variable? Yes No

Load Positioning:

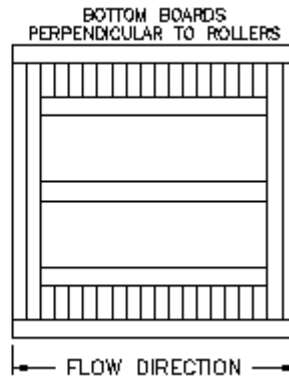
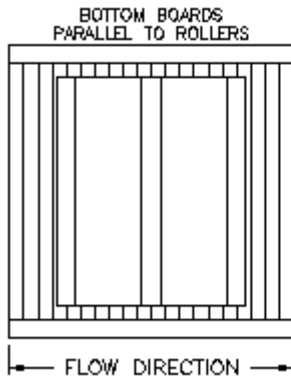
Will load be positioned on centerline? Yes No Will load be edge referenced? Yes No

Bottom Boards:

Are the bottom boards on the pallet...

Parallel to conveyor rollers

Perpendicular to conveyor rollers



WRAPPING REQUIREMENTS

No. of Top Wraps: _____ No. of Bottom Wraps: _____ No. of Wraps (full web): _____

Is film required to lock pallet? Yes No Distance from bottom of pallet: _____

Is Top Banding required? Yes No Distance from top of pallet: _____

Film Carriage Information:

Film Width? 20" Film 20"/30" Film

Pre-stretch level required? _____% Fixed

NOTE: standard shipped with machine is:
- 207% on SW-A, 3200 and 4100-FA "Ultra" series
- 247% on 3300 series

PRODUCT INFORMATION

Check appropriate individual unit/container:

- Bag Carton Cans Bottle (glass) Bottle (plastic) Tray
 Bundle Bale Cut Metal Pieces Cut Wood Pieces Pails/Buckets

Color of product: _____ Describe product: _____

Individual unit/container dimensions:

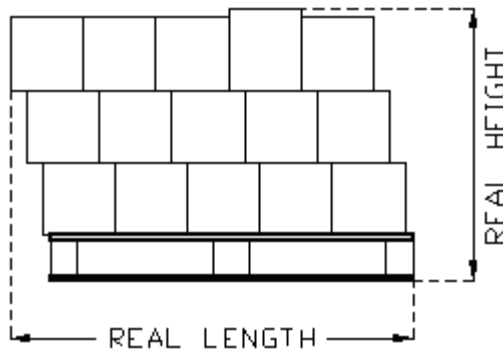
Unit Container	Length	Width	Height	Weight	Color
Minimum					
Maximum					
Other					
Other					

LOAD CONFIGURATIONS

When determining load sizes, it is important to verify all dimensions including any load imperfections

- Type 'A' Loads - Uniform and match the pallet
 Type 'B' Loads - Less than 3" variance
 Type 'C' Loads - More than 3" variance

The palletload dimensions entered below must be for the overall load, not just the pallet itself or a single layer.



Load sizes including pallet:

Sizes	Pallet Size		Load Size		Height Including Pallet	Weight	% of Production
	Length	Width	Length	Width			
Palletload 1							
Palletload 2							
Palletload 3							

Describe palletload if load is larger than pallet or slip-sheet:

Does load overhang pallet? Yes No Maximum distance overhanging: _____

Is load inboard from edge? Yes No Maximum distance inboard: _____

LOAD CONFIGURATIONS ...Continued...

Load Stability: High Medium Low

Top Layer Configuration: (check all applicable)

Full Layer Level Partial Uneven Voids

How is the product stacked? (check all applicable methods)

Column Stacked Interlocked Stacked Pattern
 On a pallet On a slip-sheet Palletless/Unitized

What is the pallet material/ Wood Plastic Composite Wood Metal

What is the slip-sheet material? Corrugated Fiber Plastic Plywood

Is the slip-sheet used as a divider between layers? Yes No

Are pallet and slip-sheet combined? Yes No Does slip-sheet ship with pallet? Yes No

Does slip-sheet require overwrap? Yes No

Is the product? Brite Stacks Tier Sheet Layered

Is this a "Basiloid" type container? Yes No

Are caps/trays required? Yes No If yes, location? Top Bottom Both

Is roping required? Yes No

FILM

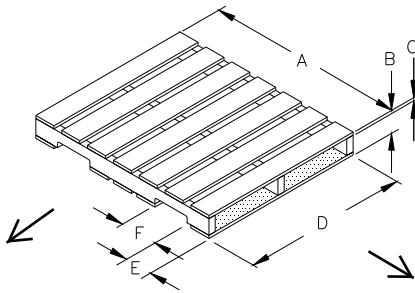
Indicate film:

Brand _____ Type _____ Gauge _____ Roll Width _____ Roll Diameter _____

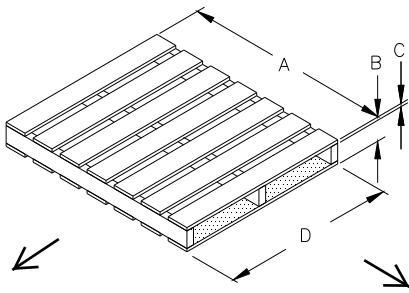
Color _____ Cling _____ No Cling _____

PALLET CONSTRUCTION / ORIENTATION

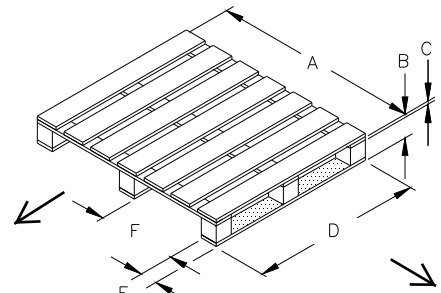
Clearly select the proper drawing matching customer pallets and indicate pallet flow direction:



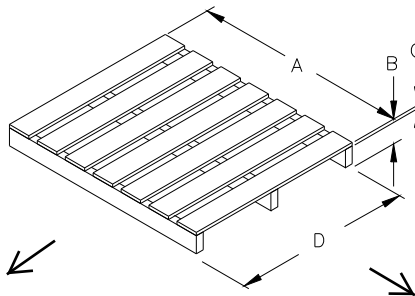
TYPE 'A'
GMA STYLE



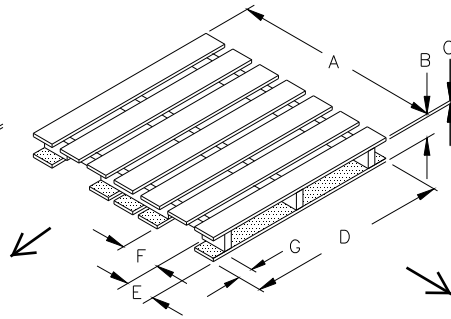
TYPE 'B'
2 WAY ENTRY STYLE



TYPE 'C'
BLOCK STYLE



TYPE 'D'
2 WAY ENTRY STYLE



TYPE 'E'
WINGED STYLE

DIMENSIONS

TYPE	A	B	C	D	E	F	WT

Indicate condition of pallets: New Used Reconditioned

Describe condition of bottom boards if used/reconditioned (important information):

GENERAL EQUIPMENT SPECIFICATIONS

Electrical: Standard: 208Y/120V 3 Phase with Neutral

Optional: 115 Volt, 1Ph 20A** 230V 3 Phase 460V 3 Phase Other _____

****NOTE: 115 Volt 1 Phase 20 Amp service is not suitable for in-line systems or stand-alone systems with more than 3 powered conveyors!**

Electrical Control Voltage: 115VAC wiring – 24VDC inputs & outputs std.) All 24VDC

Other (explain): _____

Is input power consistent? Yes No Is power subject to spike/drops/surges? Yes No

Is power line clean/separate from circuit breaker? Yes No Multiple? Yes No

Is a separate isolation transformer or special line protection required? Yes No

Preferred brand? _____

INSTALLATION / START-UP INFORMATION

Environment:

Installation site ambient temperature? ____°F Max ____°F Min ____°F Typical

Ceiling height clearance? _____ Feet Overhead cranes? Yes No

Area factors: Wash-down/corrosive (define below)

Wash-down/high or low pressure (define below)

Cold Room (32° F to 0° F) Freezer Room (0° F to -30° F)

Explosive dust Explosive vapors High humidity

Describe area factors: _____

Area/Building special classification: Class _____ Division _____ Group _____

Other NEMA requirements: _____

System Installation/Start-up:

Installation and Startup by? Customer Distributor Outside contractor Cousins

Customer Source of Information

Cousins Distributor Representative

Name: _____

Name: _____

Title: _____

Title: _____

Date : _____

Date : _____

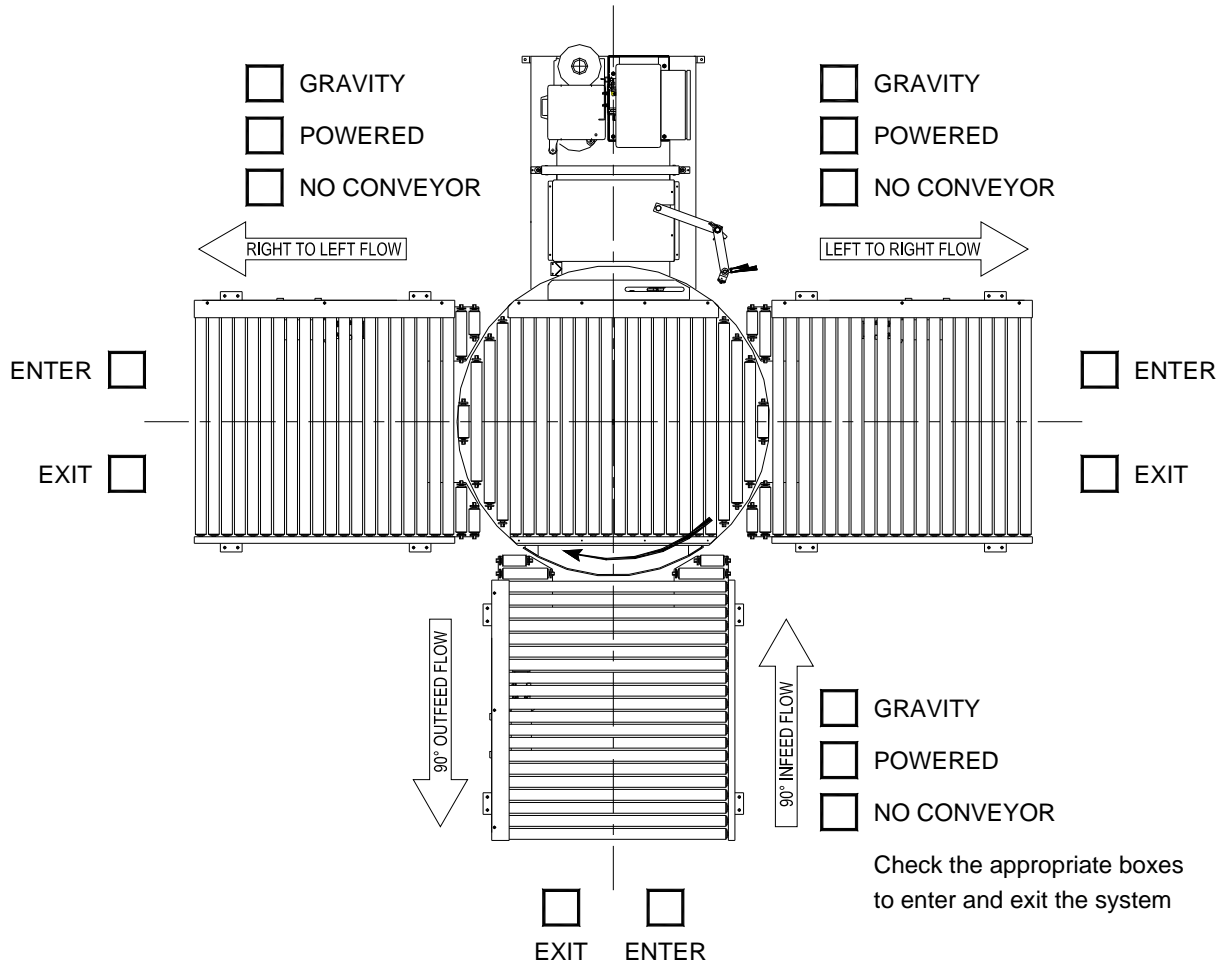
Signature: _____

Signature: _____

SKETCH PROPOSED LAYOUT

Be sure to detail as much as possible. *i.e.: palletizer, conveyors, aisle-ways and spacing, I-beams, columns, obstructions, electrical & pneumatic availability, etc.*

3300 SERIES



Additional Notes:
