

PROCUREMENT FORM

Please fill separate form for each product & tick wherever applicable

COMPANY :

ADDRESS :

Person Name : _____

Quote Ref. No : _____

Phone/Fax No. : _____

Order Ref. No : _____

E-Mail : _____

Date : _____

MACHINE

Make / Model : _____

Upper punch SEAL : Yes / No

Number of stations : _____

Lower punch SEAL : Yes / No

PRODUCT

Name : _____

Film coated : Yes / No (% = _____)


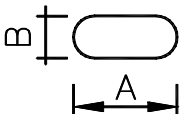
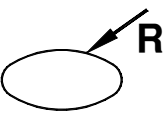


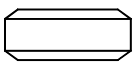

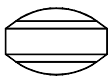

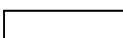
Ref. drawing name : _____

Sugar Coated : Yes / No

Sample available : Drawing – yes / no
Tablet - yes / no
Tools - yes / no

Nature of product : Abrasive - yes / no
Corrosive - yes / no
Sticky - yes / no
Effervescent – yes / no

<u>TOOLING</u>	<u>Upper</u>	<u>Lower</u>	<u>Die</u>
Type & Quantity :	D / B / Other	D / B / Other	D / B / BB
Embossing details :	Plain / break-line Embossing	Plain / break-line Embossing	Special O.D. if any

<u>TABLET</u>	Size	‘A’=	‘B’=	‘R’=	Other=
					Other
Round	Capsule	Oval	Triangle	Square Rectangle	Other
<u>TABLET</u>	Cavity	‘R’=			
					Other
FFBE	Concave	Bevel Concave	Double Concave	Flat Face	Other

SPECIAL REQUIREMENT IF ANY: e.g. Chrome plating