

# Form for technical inquiries



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**Received:** \_\_\_\_\_  
**Number:** \_\_\_\_\_  
**Person in charge:** \_\_\_\_\_

<b>Company:</b>	_____	<b>Contact:</b>	_____
<b>Street:</b>	_____	<b>Phone:</b>	_____
<b>City / ZIP-Code:</b>	_____	<b>Fax:</b>	_____
<b>Country:</b>	_____	<b>E-mail:</b>	_____

**Inquiry and requested deadline:** \_\_\_\_\_  
\_\_\_\_\_

**Method of application:**  screen printing  pad printing  spraying  roller  brush  \_\_\_\_\_

**Print:**  manual print  flat bed  cylinder  rotary screen printing  \_\_\_\_\_

**Observation:**  reflected light  transmitted light **Light source:**  D65  \_\_\_\_\_

**Fabric:** fabric number: \_\_\_\_\_ threads per cm: \_\_\_\_\_ exact characterization: \_\_\_\_\_  
threads per inch: \_\_\_\_\_ thread diameter: \_\_\_\_\_ tension of fabric: \_\_\_\_\_ Newton

**Squeegee:** Shore A: \_\_\_\_\_ RKS: \_\_\_\_\_

**Ink system:** \_\_\_\_\_ Quantity: \_\_\_\_\_ Size of can: \_\_\_\_\_

**Color shade:**  RAL \_\_\_\_\_  HKS \_\_\_\_\_  PANTONE® \_\_\_\_\_  other \_\_\_\_\_  Edition \_\_\_\_\_

**Exact name of the substrate: raw material basis, trade name, manufacturer, type, color shade (please attach at least 10 DIN-A4-samples).**

\_\_\_\_\_

**Printing side:** \_\_\_\_\_

**Drying:**  rack  drying tunnel  IR  UV  \_\_\_\_\_

**Drying time:** \_\_\_\_\_ min. \_\_\_\_\_ °C \_\_\_\_\_ °F

**Gloss:**  glossy  matt  satin gloss

**Characterization of ink film:**  rigid  elastic

**Opacity:**  opaque  transparent

**Use:**  interior  exterior  short term  long term  \_\_\_\_\_

**Version:**  one-sided  double-sided  line  area  halftone dots

**Further processing:**  thermoforming  embossing  laminating  covering up  heat sealing  
 high frequency sealing  
 UV lacquering  grooving  drilling/milling  folding  punching  
 required resistance towards chemicals: \_\_\_\_\_

**Special resistances and testing methods:**

\_\_\_\_\_

**If the indications are as complete as possible, your order can be handled quickly and unnecessary questions can be avoided.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_