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| **Customer Details** | |
| Company Name |  |
| Address |  |
|  |
| Post Code |  |
| Contact Name |  |
| Telephone Office |  |
| Telephone Mobile |  |
| Email |  |
| **Machine Details** | |
| Manufacturer |  |
| Model Number |  |
| Colour Configuration |  |
| Number of Channels |  |
| Orientation - Vertical or Horizontal |  |
| **Current Ink Details** | |
| Current Ink System |  |
| Current Supplier |  |
| Current Price (if available) |  |
| Pre-filled cartridges |  |
| Bulk System |  |
| **Conversion Required** | |
| Ink Type |  |
| **Bulk System** | |
| STECH Bulk System Mutoh Vertical |  |
| STECH Bulk System Mutoh Horizontal |  |
| STECH Bulk System Roland/Mimaki |  |
| Basic Refillable Tank & Funnel |  |
| **Pre-Filled Cartridges** | |
| ESL HPQ |  |
| Ultima HPQ |  |
| MTH HPQ |  |
| Optima HPQ |  |
| **Additional information** | |
|  | |
|  | |
| *Internal Use Only* | |
| *Distributor Name* |  |
| *Salesman Name* |  |
| *Date of Enquiry* |  |