



Blister Design Specification

Project Information:

Project: _____ (e.g. DPX5000 20's)
Customer: _____ (Your Company Name)
Machine Type: _____ (e.g. Uhlmann 1030 MTI)
Product Name: _____ (e.g. DPX5000 10mg)

Product Type:

Type	Shape	Diameter (D)	Thickness (H)	Wall (S)	Radius (R)	Length (L)	Width (B)
Round Flat				-----	-----	-----	-----
Round Bi-Convex						-----	-----
Hard Capsule "Size ____"			-----	-----	-----		-----
Soft Capsule			-----	-----			-----
Caplet Bi-Convex		-----					
Caplet Flat		-----		-----	-----		
Oval Bi-Convex		-----					
Special							

BLISTER Based on Existing Format Number: _____

Products/Blister Cutting Size Pocket Angle °

Feeding	Coding	Perforation/Rib	Foil/Film
Manually Feeding <input type="checkbox"/>	Inkjet <input type="checkbox"/>	Lengthwise <input type="checkbox"/>	PVC/ALU <input type="checkbox"/>
NG Feeder <input type="checkbox"/>	One End <input type="checkbox"/>	Across Web <input type="checkbox"/>	PVDC/ALU <input type="checkbox"/>
Vertical Feeder <input type="checkbox"/>	Both End <input type="checkbox"/>	Stiffening Rib <input type="checkbox"/>	ALU/ALU <input type="checkbox"/>
Drum Feeder <input type="checkbox"/>	Short Edge <input type="checkbox"/>		PP/ALU <input type="checkbox"/>
Brushbox Feeder <input type="checkbox"/>	Long Edge <input type="checkbox"/>		PP/PP <input type="checkbox"/>
TEG to Propose <input type="checkbox"/>	Coding Length <input type="checkbox"/>		Other <input type="checkbox"/>
			Foil Thickness <input type="text"/> μm
			Film Thickness <input type="text"/> μm

Tool Engraving: _____

Comments:

Completed By: _____

Signature: _____