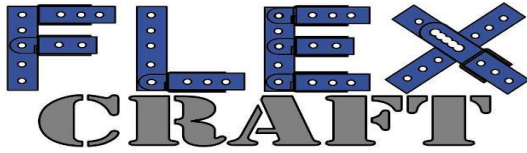


Customer Prototype Worksheet



109 Westgate Drive
Houston, MN 55943
orders@flex-craft.com
877-565-3539
507-896-3112 fax

Name
Company Name
Address
City, State, Zip
E-Mail Address
Phone Number
Fax Number
Ship Date
Project Name
Number of Units

Select Model	Size of Container, Tote or Box	W	D	H	Pick a Kit
<input type="checkbox"/> Flow Rack/Shelf	Number of Containers				<input type="checkbox"/> Introduction Kit
<input type="checkbox"/> Cart/Table	Weight per Container in lbs.				<input type="checkbox"/> Sampler Kit
<input type="checkbox"/> Work Station	Overall weight of unit w/ parts				<input type="checkbox"/> Kaizen Kit
<input type="checkbox"/> Stand/Bench Top	Other considerations				
<input type="checkbox"/> Other _____					

Determine Style and Size (in inches)		
<input type="checkbox"/> Height	<input type="checkbox"/> Height	<input type="checkbox"/> Height
<input type="checkbox"/> Depth	<input type="checkbox"/> Depth	<input type="checkbox"/> Depth
<input type="checkbox"/> Width	<input type="checkbox"/> Width	<input type="checkbox"/> Width
<input type="checkbox"/> # of Shelves	<input type="checkbox"/> # of Shelves	<input type="checkbox"/> # of Shelves
<input type="checkbox"/> Shelf depth - in / out / ext	<input type="checkbox"/> Shelf depth - in / out / ext	<input type="checkbox"/> Shelf depth - in / out / ext
<input type="checkbox"/> Shelf depth - in / out / ext	<input type="checkbox"/> Shelf depth - in / out / ext	<input type="checkbox"/> Shelf depth - in / out / ext
<input type="checkbox"/> Shelf depth - in / out / ext	<input type="checkbox"/> Shelf depth - in / out / ext	<input type="checkbox"/> Shelf depth - in / out / ext
<input type="checkbox"/> Shelf depth - in / out / ext	<input type="checkbox"/> Shelf depth - in / out / ext	<input type="checkbox"/> Shelf depth - in / out / ext
<input type="checkbox"/> Dividers tube / formed	<input type="checkbox"/> Dividers tube / formed	<input type="checkbox"/> Dividers tube / formed

Determine Casters or Feet	Determine Flow Material	Determine Color
<input type="checkbox"/> Nylon Glide Stems	<input type="checkbox"/> Metal / Heavy Weight	<input type="checkbox"/> Black
Casters	<input type="checkbox"/> Skate Wheel 60 lbs. / wheel	<input type="checkbox"/> Yellow
<u>Stem Style</u>	<u>Orbital movement</u>	<input type="checkbox"/> Blue
<input type="checkbox"/> 3" @ 120 lbs.	<input type="checkbox"/> Ball Transfer	<input type="checkbox"/> Red
<u>Expandable Style</u>		<input type="checkbox"/> Gray
<input type="checkbox"/> 3" @ 250 lbs.	<u>Light-weight non abrasive</u>	<input type="checkbox"/> White
<u>Plate Style</u>	<input type="checkbox"/> Super Slippery Tape	<input type="checkbox"/> Orange
<input type="checkbox"/> Rigid 5" @ 650 lbs.	<u>Painted or abrasive</u>	<input type="checkbox"/> Other _____
<input type="checkbox"/> Swivel 5" @ 650 lbs.	<input type="checkbox"/> Snap on Guide / foot	
<input type="checkbox"/> Rigid 6" @ 750 lbs.	<u>Plastic totes / Cardboard</u>	
<input type="checkbox"/> Swivel 6" @ 750 lbs.	<input type="checkbox"/> Sliders	
<input type="checkbox"/> Without Brakes		
<input type="checkbox"/> Top Brake	Determine Surface	
<input type="checkbox"/> Side Brake	<input type="checkbox"/>	
<u>Floor Locks</u>		
<input type="checkbox"/> 5"		
<input type="checkbox"/> 6"		

Sketch Area									

Other Notes
