



Custom Labeling and Kitting Questionnaire

Customer: _____ Contact: _____

Title: _____ Email: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip Code: _____

Account Representative: _____ Branch: _____

1. What are the monthly quantities of kits required?

Daily _____ Weekly _____ Monthly _____ Quarterly _____

If other, please list: _____

2. Is a safety stock required?

3. Where is the kit used/sold?

Manufacturing _____ Retail _____ If other, please specify _____

4. Are there any inserts or non-kit items included? (work instructions, promotions, parts from customer)

5. What are the packaging specs?

Perforated bag _____ Clear bag _____ Cardboard box _____

If other, please specify: _____

6. What are the labeling specs? (Such as barcoding, part number on outside, etc.)

7. What specific shipment preparation needs to be done? (Product packaging – wrapping inside/around product)

8. Are there any special handling requirements? If so, please comment:

9. Are there any custom artwork requirements?

10. Please provide a sketch or file outlining the information and look required. Provide vector logo file if necessary.
