LABEL SPECIFICATION SHEET

ROYAL
your success is our business

GENERAL INFORMATION

COMPANY NAME _____

CONTACT NAME _____

EMAIL ADDRESS _____

PHONE NO. _____ FAX NO. _____

QUOTE QUANTITY _____

END USE OF LABEL _____

PROJECT DESCRIPTION _____

_____

LABEL DIMENSIONS

LABEL WIDTH

LABEL LENGTH

HORIZONTAL GAPS BETWEEN LABELS
1/8" is standard

NUMBER OF LABELS ACROSS

VERTICAL GAPS BETWEEN LABELS

LABEL REPEAT
Top of Label to Top of Label

CARRIER WIDTH

MARGINAL PINFEED
☐ Yes   ☐ No

ROLL ORIENTATION (CHECK ONE)

ROLLED OUT	ROLLED OUT	ROLLED OUT	ROLLED OUT
1 HEAD FIRST ☐	**2** FOOT FIRST ☐	**3** RIGHT FIRST ☐	**4** LEFT FIRST ☐

ROLLED IN	ROLLED IN	ROLLED IN	ROLLED IN
5 HEAD FIRST ☐	**6** FOOT FIRST ☐	**7** RIGHT FIRST ☐	**8** LEFT FIRST ☐

TYPE OF ORDER

☐ NEW

☐ EXACT REPEAT

   PREVIOUS JOB NO. _____

☐ REPEAT w/COPY CHANGE

☐ REPEAT w/SPEC CHANGE

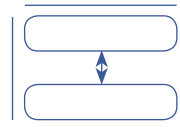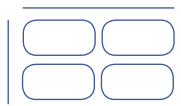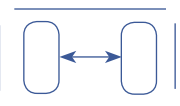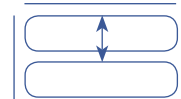☐ REPEAT w/COPY AND SPEC CHANGE

   PREVIOUS JOB NO. _____

   SPECIFY CHANGES _____

   _____

LABEL SHAPE

☐ ROUND CORNER RECTANGLE

☐ SQUARE CORNER RECTANGLE
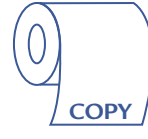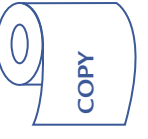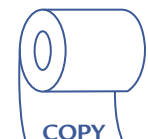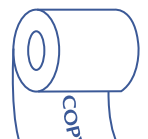
☐ CIRCLE

☐ OVAL

☐ SPECIAL SHAPE

☐ NOTCHED

SLITS OR PERFS (CHECK ALL THAT APPLY)

☐ HORIZONTAL PERFS BETWEEN LABELS

☐ VERTICAL PERFS BETWEEN LABELS

☐ VERTICAL SLIT FRONT

☐ VERTICAL SLIT BACK

☐ HORIZONTAL SLIT FRONT

☐ HORIZONTAL SLIT BACK

FACE STOCK (CHECK ALL THAT APPLY)

☐ HIGH GLOSS	☐ SEMI GLOSS
☐ MATTE LITHO	☐ EDP
☐ LASER	☐ THERMAL TRANSFER
☐ DIRECT THERMAL	☐ LATEX IMPREG
☐ POLYESTER	☐ POLYPROPYLENE
☐ POLYOLEFIN	☐ POLYSTYRENE
☐ VINYL	☐ ACETATE
☐ OTHER _____	

ROLL LABELS
(PLEASE REFER TO NUMBERED ORIENTATION CHART

NUMBER OF LABELS PER ROLL _____

NUMBER OF LABELS PER CARTON _____

CORE SIZE ☐ 3" STANDARD ☐ 1" ☐ MAX. OUTSIDE DIAMETER _____

PERFORATIONS BETWEEN LABELS ☐ YES ☐ NO

☐ DIE CUT (HAVE ROUND CORNERS AND SPACING BETWEEN EACH LABEL.)

☐ BUTT CUT (HAVE SQUARE CORNERS AND NO SPACING BETWEEN EACH LABEL ON THE ROLL.)

LASER LABELS

SHEET SIZE _____

NO. OF SHEETS _____ **NO. OF LABELS PER SHEET** _____

NO. OF HORIZONTAL FACE SLITS _____

NO. OF VERTICAL FACE SLITS _____

NO. OF SHEETS PER WRAP _____ **CTN** _____

FANFOLD LABELS

PERFORATIONS AT FOLD ☐ YES ☐ NO

FANFOLD EVERY _____ **LABELS OR** _____ **INCHES**

PERFORATION EVERY LABEL ☐ YES ☐ NO

NO. OF LABELS PER CARTON _____

ADHESIVES (CHECK ALL THAT APPLY)

☐ PERMANENT ☐ PATTERNED ☐ REMOVABLE

☐ PHARMACEUTICAL ☐ DRY GUM ☐ OPAQUE

☐ OTHER _____

COLD TEMP AT _____ °F _____ °C

LABEL APPLICATION CONDITIONS

☐ FLAT ☐ CURVED ☐ ROUGH ☐ SMOOTH ☐ DRY

☐ CLEAN ☐ MOIST ☐ OILY ☐ OTHER _____

THE TEMPERATURE RANGE AT TIME OF APPLICATION WILL BE
☐ ROOM TEMPERATURE ☐ BELOW FREEZING ☐ 100+°

THE RANGE OF TEMPERATURE EXPOSURE DURING THE SERVICE LIFE OF THE LABEL WILL BE
☐ ROOM TEMPERATURE ☐ BELOW FREEZING ☐ 100+°

LABEL WILL BE APPLIED TO

☐ CHIPBOARD OR PAPER ☐ COATED PLASTIC ☐ UNCOATED PLASTIC

☐ CORRUGATED MATERIAL (e.g. BOX) ☐ GLASS ☐ COATED METAL

☐ UNCOATED METAL ☐ OTHER _____

LIFE CYCLE OF LABEL WILL BE (FILL IN ONE)

____ HOURS ____ DAYS ____ WEEKS ____ MONTHS ____ YEARS

ENVIRONMENTAL EXPOSURES DURING THE LIFE OF THE LABEL (CHECK ALL THAT APPLY)

☐ INDOORS ☐ OUTDOORS ☐ UV LIGHT ☐ WATER/SPLASHING

☐ WATER/SUBMERGED ☐ SOLVENTS ☐ ACIDS ☐ FUEL/GASOLINE

☐ HUMIDITY ☐ FREEZER ☐ REFRIGERATOR ☐ OTHER _____

ADDITIONAL PRINTING TO THE LABEL (CHECK ALL THAT APPLY)

☐ NONE ☐ LASER ☐ INKJET ☐ DOT MATRIX

☐ THERMAL TRANSFER ☐ DIRECT THERMAL ☐ OTHER _____

COPY INFORMATION

NO. OF COLORS ON FACE _____ **ON BACK** _____

4-COLOR PROCESS ☐ YES ☐ NO

FLOOD/BLEED ☐ YES ☐ NO

INK COVERAGE ☐ HEAVY ☐ MEDIUM ☐ LIGHT

UV VARNISH (COUNTS AS ONE COLOR) ☐ YES ☐ NO

OVER LAMINATION ☐ YES ☐ NO

OTHER SPECS (CHECK ALL THAT APPLY)

☐ METALLIC/FLUORESCENT INKS

☐ NUMBERING

☐ PRINTING ON ADHESIVE

☐ PRINTING ON LINER

☐ VARIABLE DATA

☐ HOLE PUNCHING

☐ 100% VARNISH COATING

☐ PARTIAL VARNISH COATING

☐ PMS COLORS

☐ COLOR MATCHES

☐ VERSION CHANGES

☐ SCREENS

PRINTER INFORMATION

MAKE OF PRINTER _____

MODEL _____

HOW IS THE LABEL APPLIED?

☐ BY HAND ☐ AUTOMATIC

SPECIAL NOTES/REMARKS

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

DELIVERY DATE NEEDED BY