Customer: _____ / _____

Description: _____

_____

JOB NUMBER

Contact/Phone/Email: _____

This form can be filled out on screen and then printed. Click RESET to clear all fields.

Reset

☐ **LIVE JOB**

☐ Indigo ☐ Sheetfed ☐ Web ☐ Outside Service

☐ Variable Web ☐ Sheetfed UV ☐ Docutech

JOB JACKET/RFE

Estimate Date: _____	Revision Date: _____	Revision Date: _____	Revision Date: _____
Date Needed: _____ ☐ AM ☐ PM	Date Needed: _____ ☐ AM ☐ PM	Date Needed: _____ ☐ AM ☐ PM	Date Needed: _____ ☐ AM ☐ PM
QUOTED TO CUSTOMER	**QUOTED TO CUSTOMER**	**QUOTED TO CUSTOMER**	**QUOTED TO CUSTOMER**
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
☐ Quote Sheet ☐ E-mail	☐ Quote Sheet ☐ E-mail	☐ Quote Sheet ☐ E-mail	☐ Quote Sheet ☐ E-mail
☐ Verbal	☐ Verbal	☐ Verbal	☐ Verbal
Date_____ By_____	Date_____ By_____	Date_____ By_____	Date_____ By_____

ORDER ACCEPTANCE

Sales Rep_____ Delivery Date_____ Order Accepted by_____

CSR _____ Quantity_____ Order Date_____

ESTIMATING USE ONLY

Variations:							
Estimate No.							
Estimate No.							
Estimate No.							
Estimate No.							
Estimate No.							
Estimate No.							

Notes

PREMEDIA

☐ New File ☐ Exact Rerun: Job No. _____

☐ Pick-up Job No. _____ with changes _____

Indigo: ☐ Static ☐ Variable (describe variable information on Mailing Services estimate form MAIL048)

Scatter Work: No. of supplied electronic image(s): _____

Output size: _____ 4x5 _____ 5x7 _____ 8x10 _____ 10x12 _____ 12x18

☐ Rounds of scatter proofs _____ ☐ ScreenDot ☐ Epson

☐ Additional color correction time _____

Scatter Notes:

_____

Proofing: ☐ Improof/Konica ☐ Epson ☐ ScreenDot ☐ Indigo Proof (Live Production Sample) ☐ Docutech Proof

Add'l No. of Sets _____ _____ _____ _____ _____

PREP NOTES:

_____

Quantity: _____ _____ _____ _____ _____ _____

SPECIFICATIONS

A	Flat size: W:	H:	Finished size: W:	H:	No. pgs:
B	Flat size: W:	H:	Finished size: W:	H:	No. pgs:
C	Flat size: W:	H:	Finished size: W:	H:	No. pgs:
D	Flat size: W:	H:	Finished size: W:	H:	No. pgs:

A	Stock ☐ FSC ☐ SFI		Coverage %	Bleeds
A	Ink side 1:	Ink side 2:	☐ AQUEOUS ☐ VARNISH ☐ UV ☐ 1/S ☐ 2/S ☐ GLOSS ☐ SATIN ☐ DULL ☐ OA ☐ SPOT ☐ OA/SPOT	☐ WET ☐ DRY

B	Stock ☐ FSC ☐ SFI		Coverage %	Bleeds
B	Ink side 1:	Ink side 2:	☐ AQUEOUS ☐ VARNISH ☐ UV ☐ 1/S ☐ 2/S ☐ GLOSS ☐ SATIN ☐ DULL ☐ OA ☐ SPOT ☐ OA/SPOT	☐ WET ☐ DRY

C	Stock ☐ FSC ☐ SFI		Coverage %	Bleeds
C	Ink side 1:	Ink side 2:	☐ AQUEOUS ☐ VARNISH ☐ UV ☐ 1/S ☐ 2/S ☐ GLOSS ☐ SATIN ☐ DULL ☐ OA ☐ SPOT ☐ OA/SPOT	☐ WET ☐ DRY

D	Stock ☐ FSC ☐ SFI		Coverage %	Bleeds
D	Ink side 1:	Ink side 2:	☐ AQUEOUS ☐ VARNISH ☐ UV ☐ 1/S ☐ 2/S ☐ GLOSS ☐ SATIN ☐ DULL ☐ OA ☐ SPOT ☐ OA/SPOT	☐ WET ☐ DRY

☐ If cost-effective, price on **Indigo** ☐ Specific grain needed? ☐ Long

☐ If cost-effective, price on **Docutech** ☐ Short

JET PRESS

Size/Style			
Stock		☐ Reg Gum	☐ Redi-Strip
Ink side 1:	Ink side 2:	Coverage %	Bleeds

Quantity: _____ _____ _____ _____ _____ _____

PRESS ISSUES

W/T – W/F – Perfect OK? ☐ **Yes** ☐ **No** ☐ Additional MR sheets _____ ☐ Press check hours _____

BINDERY ☐ Trim to Size

SCORE/ PERF

- ☐ Letterpress
- ☐ Litho (press)
- ☐ Moll (folder)
- ☐ Rossback (Tray Cards)

FOLD

- ☐ Half
- ☐ Letter
- ☐ DBL Parallel
- ☐ Roll
- ☐ Closed DBL Gate
- ☐ Accordion
- ☐ Quarter
- ☐ Signature
- ☐ Fold & Fugitive glue
  # of spots _____
- ☐ Other _____

BINDING

- _____" Edge
- ☐ S.S.
- ☐ GBC
- ☐ Spiral-O-Wire
- ☐ Plastic Spiral
- ☐ Wire Spiral
- ☐ WIR-O
- ☐ Perfect Bind
- ☐ OTA-Bind
- ☐ Specialty Bind
- ☐ Other

MISCELLANEOUS

- ☐ Drill 1-5
- ☐ Drill 6 or more
- ☐ Round Corner 2
- ☐ Round Corner 4
- ☐ Collate
- ☐ Stitch ULC
- ☐ Hand Stitch
- ☐ Padding on _____ Edge
  Sheets per pad _____
  with chip ☐ Yes ☐ No
- ☐ Machine Fold and Glue
- ☐ Hand Tape
- ☐ Tip on Card
- ☐ Kitting
- ☐ Shrink _____ Pack
- ☐ Polywrap
  _____ Items

LETTERPRESS

- ☐ **Diecut**
  ☐ New ☐ Standing
  Die #_____ # Up_____
- ☐ **Pocket Folder**
  ☐ 1 Pocket ☐ 2 Pockets
  ☐ Glue Tabs
  ☐ Gussets _____
  Pocket Size _____
- ☐ **Convert Envelope**
  Size _____
  ☐ OS (Booklet)
  ☐ OE (Catalog)
  ☐ Diag ☐ Center ☐ DSS
  ☐ Window _____
- ☐ **Eyeletting**
  Size _____
  Color _____

EMBOSS/DEBOSS

- ☐ New ☐ Standing
- ☐ Register to print
- ☐ Blind
- ☐ Single level
- ☐ 2 Level
- ☐ Multi level
- ☐ Sculptured

Image Area _____

- ☐ **Tab Cutting**
  No. of Tabs _____
  Bank of _____
  - ☐ Tab Copy
  - ☐ Common Body Copy
  - ☐ Unique Body Copy
  - ☐ Mylar (on Tab)
  - ☐ Reinforce (Binding Edge)

FOIL

- ☐ New ☐ Standing
- ☐ Flat
- ☐ Combo

Image Area _____

LAMINATE

Mil _____

- ☐ 1/side ☐ 2/side
- ☐ Gloss ☐ Matte
- ☐ Sealed edge

UV (OUTSIDE)

- ☐ Flood ☐ Spot
- ☐ 1/side ☐ 2/side
- ☐ Gloss ☐ Dull
- ☐ Speciality

_____

DELIVERIES

☐ Lettershop ☐ Distribution Services ☐ Inventory
☐ Box weight limits ☐ **10** ☐ **20** ☐ **40** lbs. ☐ Skid pack only ☐ Gaylord Pack

ENPOINTE Local Small Package Delivery _____ enter number of one-way trips (Proofs/Samples/Mock-ups, etc.)

ENPOINTE Local Product Delivery _____ enter total number of locations

FOB ENPOINTE Dock ☐ No Delivery Required

Freight request needed
☐ FOB to City / State / Zip _____

Additional Notes

Customer: _____ / _____

Description: _____

_____

JOB NUMBER

Contact/Phone/Email: _____

☐ LIVE JOB

MAILING / DATA PROCESSING ESTIMATE JACKET

Estimate Date: _____	Revision Date: _____	Revision Date: _____	Revision Date: _____
Date Needed: _____ ☐ AM ☐ PM	Date Needed: _____ ☐ AM ☐ PM	Date Needed: _____ ☐ AM ☐ PM	Date Needed: _____ ☐ AM ☐ PM
QUOTED TO CUSTOMER	**QUOTED TO CUSTOMER**	**QUOTED TO CUSTOMER**	**QUOTED TO CUSTOMER**
☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
☐ Quote Sheet ☐ E-mail	☐ Quote Sheet ☐ E-mail	☐ Quote Sheet ☐ E-mail	☐ Quote Sheet ☐ E-mail
☐ Verbal	☐ Verbal	☐ Verbal	☐ Verbal
Date_____ By_____	Date_____ By_____	Date_____ By_____	Date_____ By_____

ORDER ACCEPTANCE

Sales Rep_____ Delivery Date_____ Order Accepted by_____

CSR _____ Quantity_____ Order Date_____

ESTIMATING USE ONLY

Variations:							
Estimate No.							
Estimate No.							
Estimate No.							
Estimate No.							
Estimate No.							
Estimate No.							

Notes

Quantity: _____ _____ _____ _____ _____ _____

POSTAL CLASS

☐ Non-Profit ☐ First Class Basic (No Sorting Required)
☐ Pre-Sort Standard ☐ Priority Mail (No Sorting Required)
☐ Pre-Sort First Class

# of Lists: _____ **Piece Size:** _____ x _____

Total Weight: _____ (ounces) ☐ Postage Estimate Needed (must provide weight)

Postage: ☐ Stamp ☐ Meter ☐ ENPOINTE Indicia ☐ Customer Indicia

# of Drops/Mail Dates: _____
IF Multiple Drops – will entire quantity be produced at one time? ☐ Yes ☐ No
☐ 100% Mailing
☐ Drop Shipping

DATA PROCESSING

☐ CASS Certify ☐ Dupe Elimination ☐ Sequence #'s ☐ Custom Reports
☐ NCOA ☐ Run Suppression ☐ Nth Selects # of reports _____
☐ Merge Files ☐ Track-n-Trace ☐ Seeds
☐ GEO Processing ☐ Map Creation ☐ Direct Mail Accelerator
☐ Existing Map Reprint
☐ Standard Pin
☐ Custom Pin

NOTES:

VARIABLE INDIGO

Variable: ☐ Name/Address ☐ Other Variables # _____ (describe/provide sample)
# of Unique Art Set-ups: _____

LASERING

☐ Multi-Page Nesting Which form(s) nest together? ☐ A ☐ B ☐ C ☐ D

A. **Component:** _____
☐ Simplex ☐ Duplex
Variable: ☐ Name/Address ☐ Other Variables # _____ (describe/provide sample)
# of Unique Letter Set-ups: _____
Sheet Size: _____ x _____ **# Up:** _____ **Final Size:** _____ x _____
☐ Supplied material / ENPOINTE printed ☐ ENPOINTE to purchase blank stock: (specified on print est.)

B. **Component:** _____
☐ Simplex ☐ Duplex
Variable: ☐ Name/Address ☐ Other Variables # _____ (describe/provide sample)
# of Unique Letter Set-ups: _____
Sheet Size: _____ x _____ **# Up:** _____ **Final Size:** _____ x _____
☐ Supplied material / ENPOINTE printed ☐ ENPOINTE to purchase blank stock: (specified on print est.)

C. **Component:** _____
☐ Simplex ☐ Duplex
Variable: ☐ Name/Address ☐ Other Variables # _____ (describe/provide sample)
# of Unique Letter Set-ups: _____
Sheet Size: _____ x _____ **# Up:** _____ **Final Size:** _____ x _____
☐ Supplied material / ENPOINTE printed ☐ ENPOINTE to purchase blank stock: (specified on print est.)

INKJETTING

QUALITY

☐ LQ 200 DPI

☐ Executive 300 DPI

☐ T.Q 600 DPI

PIECE

☐ Envelope Size: _____

☐ Postcard Size: _____

☐ Self-Mailer Size: _____

☐ Other Size: _____

PRINT AREA

☐ Name / Address Block

☐ Indicia

☐ Other

(Describe or include a drawing)

COLOR

☐ Black Only

☐ Color # of Colors: _____

☐ See Attachment

(Include a drawing of color placement and image sizes)

☐ **INKJET INLINE ON STITCHER**

INSERTING

- Envelope must be open side to machine insert.
- If using an A-series Envelope, it must have a machine insertable flap.

Envelope Size: _____

Window Envelope: ☐ Yes ☐ No

# of Inserts: (List below)

#1: _____ #7: _____

#2: _____ #8: _____

#3: _____ #9: _____

#4: _____ #10: _____

#5: _____ #11: _____

#6: _____ #12: _____

☐ Name Matching (What matches to what?) _____

OTHER LETTERSHOP

☐ Affix Stamp

☐ Affix Tab(s) (to postal regulations)

☐ Affix Supplied Clean Release Card

☐ Handwork (Describe)

☐ Affix Supplied Label Size: _____

☐ Affix Supplied Post it Note

☐ Affix ENPOINTE Blank Post-it Note

Notes

SAMPLES

Due Date: ____/____/____

Qty._____ To:

Qty._____ To:

Qty._____ To:

EXCESS MATERIAL

☐ Toss

☐ Long term

☐ EPD

☐ Hold (1 Week Max.)

☐ Return to:

POSTAGE ESTIMATE

Non-Profit _____ to _____

Presorted Standard

Auto _____ to _____

Non-Auto _____ to _____

Presorted First Class

Auto _____ to _____

Non-Auto _____ to _____

First Class Basic _____

Additional Notes