

Colour Match Request Form

designLab®

KYDEX®
THERMOPLASTICS

COMPLETE THIS FORM & SUBMIT TO:

SEKISUI KYDEX, LLC
ATTN: designLab®
Colour Development
4410 Columbia Blvd
Bloomsburg, PA 17815
designLab@kydex.com

CONTACT NAME: _____
CUSTOMER CONTACT: _____ IF DIFFERENT THAN REQUESTOR
COMPANY NAME: _____
ADDRESS: _____ COUNTRY: _____
CITY: _____ STATE: _____ POSTAL CODE: _____
PHONE: _____ EMAIL: _____
SEKISUI KYDEX REP: _____
DATE REQUIRED: _____ FORMED PART REQUIRED?: Yes No EORI # _____
REQUIRED FOR EU ONLY

PRODUCT TYPE:	KYDEX® T	KYDEX® 510	KYDEX® 6185	KYDEX® FST
	KYDEX® T-LW	KYDEX® 1900	KYDEX® 6200	KYDEX® 1100UV
	KYDEX® 100	KYDEX® 2200LT	KYDEX® 6200LT	KYDEX® XD
	KYDEX® 110	KYDEX® 2100LTu	KYDEX® 6503	KYDEX® XD03
	KYDEX® 150	KYDEX® 2200LTu	KYDEX® 6513	KYDEX® XDWG
	KYDEX® 152WG	KYDEX® P2200	KYDEX® 6565	KYDEX® 7200ST
	KYDEX® 160	KYDEX® 5555	KYDEX® 6565HI	Other: _____
	KYDEX® 430	KYDEX® 5555HI		

ANTICIPATED TEXTURE: (If this choice is left blank, P-3 will be matched.)	P-3 Velour Matte P-1 Haircell P-5 Velvet	P-A Polished P-K Cashmere P-6 Suede	P-E Smooth Nap P-H Seville	P-8 Suede P-C Level Haircell
	*P-5 AND P-6 FOR KYDEX® FST AND KYDEX® 7200ST ONLY			
	Other: _____			

END USE: _____ PROJECT NAME: _____

ESTIMATED PROJECT VOLUME: _____ kg _____ lbs _____ m² _____ ft²

Will you be sending physical samples for matching purposes? Yes No RETURN SAMPLE? Yes No

How will the colour be approved? Visual assessment Spectral

What is the primary light source? Cool White Daylight Other: _____

Description of Colour Submission / Cross References:

Special Requests / Comments:

Gauges vary by product. Texture availability is dependent on gauge. Colour match samples are for visual reference only, not for test purposes. Samples will not reflect actual production sheet thickness, gloss, or texture.

SUBMITTING YOUR FORM:

Electronically: When your form is complete, save a copy of it to your computer and email it to us. Open the form, select 'File' then 'Attach to Email'. If you have a default email program such as Outlook, your system will prompt you to attach the file. If you do not have a default email program, manually open your email program and attach the file.

By post: When your form is complete, save a copy to your computer. To submit your form, please send to the designLab®, using the contact information above, left.

INTERNAL USE ONLY

COLOUR MATCH NUMBER: _____

DATE REQUEST RECEIVED: _____

SEKISUI
KYDEX

Customer Collaboration

4410 Columbia Blvd
Bloomsburg, PA 17815 USA
Phone: 800.325.3133, +1.570.389.5810
Email: info@kydex.com

appLab™

Phone: 800.682.8758
+1.570.387.6997
Email: applab@kydex.com

kydex.com