



森 林 木 业 企 业 有 限 公 司

PLANTATION RESOURCES ENTERPRISE PTE LTD

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To	:	Ref No.	:
Attn	:	Date	:
C.C.	:	Fax No. To	:
From	:	Reply Fax No.	:

QUESTIONNAIRE FOR REQUIREMENT OF NEW PROJECT

1) Required Production Volume

- | | | |
|-------------|----------------------|-----------------------|
| (a) Initial | <input type="text"/> | m ³ /month |
| (b) Future | <input type="text"/> | m ³ /month |
| | <input type="text"/> | m ³ /year |

2) Estimation Budget of Project:

- | | | |
|---------------|------|----------------------|
| (a) Machinery | US\$ | <input type="text"/> |
| (b) Others | US\$ | <input type="text"/> |

3) Estimate Total Log Supply:

- | | | |
|-----|----------------------|-----------------------|
| (a) | <input type="text"/> | m ³ /month |
| (b) | <input type="text"/> | m ³ /year |

4) Type of Forest

- | | |
|---------------------------------|----------------------|
| (a) Natural Hard Wood | <input type="text"/> |
| (b) Natural Hard Wood Clear Cut | <input type="text"/> |
| (c) Plantation | <input type="text"/> |
| (d) Others | <input type="text"/> |

5) Type of Products:

- | | |
|----------------|----------------------|
| (a) Core Stock | <input type="text"/> |
| (b) Face/Back | <input type="text"/> |
| (c) Plywood | <input type="text"/> |
| (d) Wood Chip | <input type="text"/> |

6) Thickness Required:

6.1 Face/Back

- | | |
|-------------|----------------------|
| (a) 0.40 mm | <input type="text"/> |
| (b) 0.50 mm | <input type="text"/> |
| (c) 0.55 mm | <input type="text"/> |
| (d) 0.60 mm | <input type="text"/> |
| (e) 0.65 mm | <input type="text"/> |
| (f) others | <input type="text"/> |

6.2 Core Stock

- | | |
|-------------|----------------------|
| (a) 1.60 mm | <input type="text"/> |
| (b) 2.0 mm | <input type="text"/> |
| (c) 2.5 mm | <input type="text"/> |
| (d) 3.0 mm | <input type="text"/> |
| (e) 3.6 mm | <input type="text"/> |
| (f) others | <input type="text"/> |

7) Type of Wood Species To Be Peeled

7.1 Major Tropical Hard Wood

- | | | |
|--------------------------|----------------------|---|
| (a) Laran | <input type="text"/> | % |
| (b) Miscellaneous | <input type="text"/> | % |
| (c) <input type="text"/> | <input type="text"/> | % |

7.2 Plantation Species

- | | | |
|--------------------------|----------------------|---|
| (a) Falcata | <input type="text"/> | % |
| (b) Rubber Wood | <input type="text"/> | % |
| (c) Coconut Tree | <input type="text"/> | % |
| (d) <input type="text"/> | <input type="text"/> | % |

8) Diameter Range of Log Supply

- | | | | |
|--------------|---------|--------------|---------|
| (a) 16-20 cm | _____ % | (e) 36-40 cm | _____ % |
| (b) 21-25 cm | _____ % | (f) 41-45 cm | _____ % |
| (c) 26-30 cm | _____ % | (g) 46-50 cm | _____ % |
| (d) 31-35 cm | _____ % | (h) 50cm up | _____ % |

9) Location of New Project

- | | |
|-------------------|----------------------|
| (a) Forest | <input type="text"/> |
| (b) Existing Mill | <input type="text"/> |
| (c) Others | <input type="text"/> |

- 10) Do you have Plywood Mill:
- | | |
|---------|----------------------|
| (a) Yes | <input type="text"/> |
| (b) No | <input type="text"/> |

- 11) Working Shift
- | | | |
|-------------|----------------------|------------|
| (a) 1 shift | <input type="text"/> | 12 hrs/day |
| (b) 2 shift | <input type="text"/> | 24 hrs/day |
| (c) 3 shift | <input type="text"/> | 24 hrs/day |

- 12) Power Supply
- | | |
|-------|---------|
| _____ | Voltage |
| _____ | Hz |

- 13) Required the Project in Operation: _____ months

- 14) Other Requirements
- | |
|--|
| (a) Calculate total electricity required for the plant |
| (b) Manpower Requirement |
| (c) _____ |

- 15) Required PRE Services
- | | |
|----------------------------|----------------------|
| (a) Forest Survey | <input type="text"/> |
| (b) Quotation of Machinery | <input type="text"/> |
| (c) Feasibility Study | <input type="text"/> |
| (d) Lay-out | <input type="text"/> |
| (e) Turnkey Project | <input type="text"/> |
| (f) Project Management | <input type="text"/> |

- 16) If you found the project is interested.
Do not hesitate to call us as appointment.
- | Date | Time | Place |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

- 17) Your Contact
- | | |
|------------------|----------------------|
| Person In Charge | <input type="text"/> |
| Office Phone No. | <input type="text"/> |
| Fax No. | <input type="text"/> |
| E-mail Add | <input type="text"/> |

Full Name : _____
 Signature : _____
 Submitted by : _____