



UL COLOR LAB

MEASUREMENT OFFICE SUBMISSION FORM

Accurate information is critical for successful Colorflow upload

SUPPLIER/COMPANY NAME:

CONTACT EMAIL (to receive qtx file):

DIGIT HOST VENDOR NUMBER (HVN):

MILL ID:

FABRIC MILL:

ITEM/GARMENT DESCRIPTION:

FIBER CONTENT:

SEASON:

BRAND NAME:

DEPT #:

COUNTRY OF ORIGIN:

SOURCING OFFICE:

ACCREDITATION #:

STYLE NUMBER(S):

COLOR NAME AND COLOR NUMBER:

TEST TYPE: VENDOR STANDARD LDE SBE

SOLID PRINT YARN DYE

PRINT PATTERN NAME (see next page to list all print colors):

Existing Colorflow ID:

(for additional LDE and SBE measurements)

Previous LDE:

(for SBE measurements)

3RD PARTY BILLING COMPANY NAME (if different from vendor):



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SWATCH SUBMITTAL PAGE

SOLID/YARN DYE COLOR NAME AND CSI NUMBER (if applicable):

A large, empty rectangular box with a black border, intended for the submission of a color swatch. The box is centered on the page and occupies most of the middle section.

SUBMIT A 4" X 4" MINIMUM SWATCH FOR MEASUREMENT.

SWATCH NUMBER (each print color in pattern/swatch will be the same label):

PRINT COLORS: