

G7® Pre Qualification Checklist Sheetfed



Purpose

The primary purpose of this document is to define your current press condition compared to manufacturer recommended settings prior to a G7® calibration.

A checklist of consumables, settings, pressures, conductivity readings, etc. provide the press operator, management, and G7® Expert the required awareness of press fitness and condition in order to identify necessary adjustments to optimize print quality in preparation for a G7® calibration.

Well documented press conditions will help you adhere to manufacturer recommended specifications, track problems, establish standard operating procedures, and manage ISO 15339 (CRPC1 through CRPC7) specifications consistently after the G7® calibration.

It is highly recommended to read the Idealliance® G7® How to before guide before completing this document. It can be found at <https://idealliance.org>

Instructions

Be as thorough as possible when completing this form. However, if you are unable to answer many of these questions it is perfectly acceptable. For example, you may not own a torque wrench, measure ink trap, know density tolerances, or water pH. If you have any concerns please contact your G7® Consultant or Press Manufacturer.

Press Description

Manufacturer	
Model	
Total Units	
Units used for G7® Calibration	
Perfector	<input type="checkbox"/> Yes <input type="checkbox"/> No
UV	<input type="checkbox"/> Yes <input type="checkbox"/> No
Waterless	<input type="checkbox"/> Yes <input type="checkbox"/> No
Coater	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> UV <input type="checkbox"/> Aqueous
CIP 3 or 4	<input type="checkbox"/> Yes <input type="checkbox"/> No
Measuring Device Make/Model	
Total Impressions	
Press Age	
Press Speed Max	
Average Production Speed	
Press Speed for G7® Calibration	

Press Maintenance

Maintenance/Service Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Last Yearly Maintenance	
Maintenance Log?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Last Roller Inspection	
Was a durometer used?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Frequency of Roller Stripe Check	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other
Frequency of Roller Maintenance	<input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Other
What is the Roller Maintenance Routine?	
What problems areas of concern on press are there?	

Plates

Manufacturer	
Name	
Thickness	
Line Screen	
Dot Shape	
Imaging Resolution	
Plate Control Target/Slug	<input type="checkbox"/> Yes <input type="checkbox"/> No

Plate Packing

Manufacturer	
Name	
Thickness	
Describe How Packing is Built	

Paper 1

Manufacturer	
Name	
Finish	
Grade	
Weight/Thickness	
Paper White	L*: a*: b*:

Blankets

Manufacturer	
Name	
Thickness	
Torque Wrench Spec	

Ink

Manufacturer	
Set Name	
ISO 2846 Compliant	<input type="checkbox"/> Yes <input type="checkbox"/> No

Fountain Solution

Manufacturer	
Name	
Temperature	
Solution pH Range	Actual
	Recommended
Solution Conductivity	Actual
	Recommended
RO Water Used	<input type="checkbox"/> Yes <input type="checkbox"/> No
Water pH	
Water Conductivity	

Plate Height to Bearer

Unit	Actual	Recommended
1		
2		
3		
4		
5		
6		
7		
8		

Paper 2

Manufacturer	
Name	
Finish	
Grade	
Weight/Thickness	
Paper White	L*: a*: b*:

Blanket Packing

Manufacturer	
Name	
Thickness	
Describe How Packing is Built	

Blanket Wash

Manufacturer	
Name	

Roller Wash

Manufacturer	
Name	

Press Wash

Manufacturer	
Name	

Blanket Height to Bearer

Unit	Actual	Recommended
1		
2		
3		
4		
5		
6		
7		
8		

Plate to Blanket Squeeze

Unit	Actual	Recommended
1		
2		
3		
4		
5		
6		
7		
8		

Blanket to Impression Squeeze

Unit	Actual	Recommended
1		
2		
3		
4		
5		
6		
7		
8		

Ink Roller Stripes

Roller	Unit 1		Unit 2		Unit 3		Unit 4	
	Stripe	Duro	Stripe	Duro	Stripe	Duro	Stripe	Duro
1st Form to Plate								
2nd Form to Plate								
3rd Form to Plate								
4th Form to Plate								
Ductor to Ink Roller								
Forms to Ocillator								

Roller	Unit 5		Unit 6		Unit 7		Unit 8	
	Stripe	Duro	Stripe	Duro	Stripe	Duro	Stripe	Duro
1st Form to Plate								
2nd Form to Plate								
3rd Form to Plate								
4th Form to Plate								
Ductor to Ink Roller								
Forms to Ocillator								

Dampener Roller Stripes

Roller	Unit 1		Unit 2		Unit 3		Unit 4	
	Stripe	Duro	Stripe	Duro	Stripe	Duro	Stripe	Duro
Form to Plate								
Form to Oscillator								
Metering to Oscillator								
Bridge Roller	<input type="checkbox"/> On <input type="checkbox"/> Off		<input type="checkbox"/> On <input type="checkbox"/> Off		<input type="checkbox"/> On <input type="checkbox"/> Off		<input type="checkbox"/> On <input type="checkbox"/> Off	

Roller	Unit 5		Unit 6		Unit 7		Unit 8	
	Stripe	Duro	Stripe	Duro	Stripe	Duro	Stripe	Duro
Form to Plate								
Form to Oscillator								
Metering to Oscillator								
Bridge Roller	<input type="checkbox"/> On <input type="checkbox"/> Off		<input type="checkbox"/> On <input type="checkbox"/> Off		<input type="checkbox"/> On <input type="checkbox"/> Off		<input type="checkbox"/> On <input type="checkbox"/> Off	

*Ink Density

Ink	House Density	+/- Tolerance
K		
C		
M		
Y		

*TVI (Dot Gain) 50%

Ink	House TVI %	+/- Tolerance
K		
C		
M		
Y		

Press Process Control Tools

Durometer	<input type="checkbox"/> Yes <input type="checkbox"/> No
Packing Gauge	<input type="checkbox"/> Yes <input type="checkbox"/> No
Micrometer	<input type="checkbox"/> Yes <input type="checkbox"/> No
ph Meter	<input type="checkbox"/> Yes <input type="checkbox"/> No
Conductivity Meter	<input type="checkbox"/> Yes <input type="checkbox"/> No
Plate Reader	<input type="checkbox"/> Yes <input type="checkbox"/> No
Torque Wrench	<input type="checkbox"/> Yes <input type="checkbox"/> No
Densitometer	<input type="checkbox"/> Yes <input type="checkbox"/> No
Last Factory Calibration Date	
Spectrophotometer	<input type="checkbox"/> Yes <input type="checkbox"/> No
Last Factory Calibration Date	

Prepress Workflow

Manufacturer	
Model	

Proofer

Manufacturer	
Model	
RIP	
Ink	
Paper	
Other	

L*a*b*

Ink	L*	a*	b*
K			
C			
M			
Y			
R			
G			
B			

*Wet Ink Trap

Ink Overprints	House Trap %	+/- Tolerance
M/Y (Red)		
C/Y (Green)		
C/M (Blue)		

Lighting

Viewing Booth	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lamp Manufacturer	
Lamp Model	
Lamps Last Changed	
Are Lamps 5000K?*	<input type="checkbox"/> Yes <input type="checkbox"/> No
Press Console Lighting	<input type="checkbox"/> Yes <input type="checkbox"/> No
Lamp Manufacturer	
Lamp Model	
Lamps Last Changed	
Are Lamps 5000K?*	<input type="checkbox"/> Yes <input type="checkbox"/> No

*Use GATF Rehm Indicator to check 5000K lighting (included in kit)

Platesetter

Manufacturer	
Model	

Prepress Process Control Tools

Spectrophotometer	<input type="checkbox"/> Yes <input type="checkbox"/> No
Last Factory Calibration Date	
Plate Reader	<input type="checkbox"/> Yes <input type="checkbox"/> No
Last Factory Calibration Date	

*Ink Density, TVI, and Ink Trap are not recommended metrics for targeting GRACoL, SWOP, or ISO 12647-2 through G7® calibration. For this checklist the data is only a gauge to understand your current process control practices.