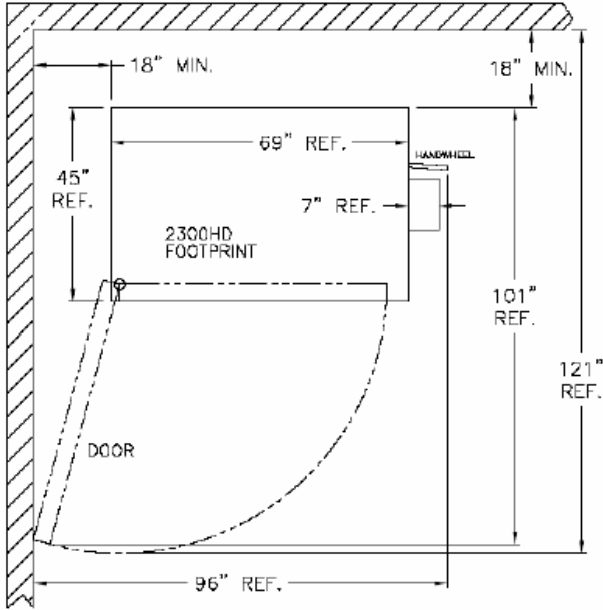


Surveyor _____

Date _____

Subject: Survey Form



Store Location:

Address _____

City, State, Zip _____

Store Phone Number _____

Delivery Week Needed _____

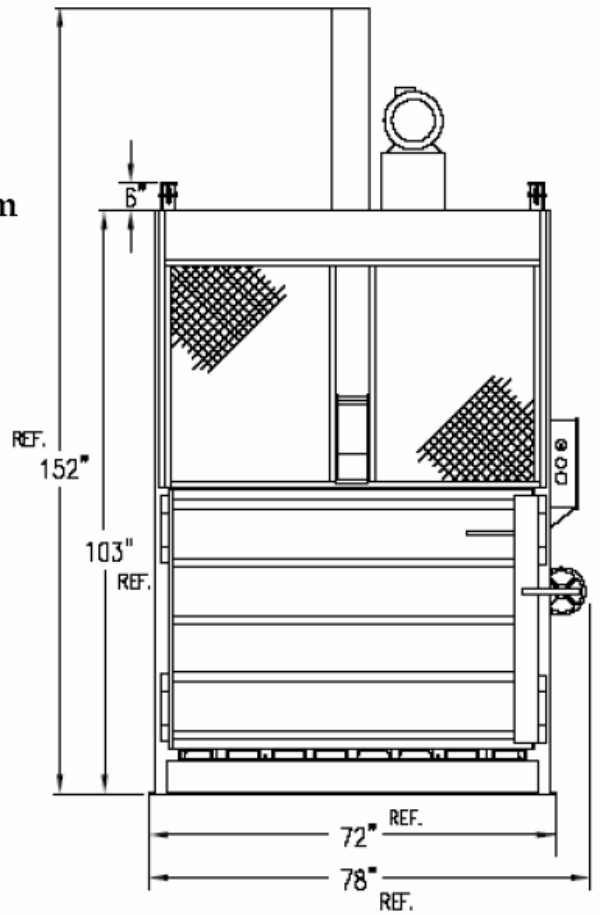
Site Contact _____

Phone (Contact / Site) _____

Door Hinge (Left / Right) _____

Voltage (3 Phase) _____

Color: Green



Removal Required (Yes / No) _____

Floor Over a Basement (Yes/ No) _____

Ceiling Height _____

Installation Door Size _____

Bale Storage (Quantity Inside/Outside) _____

Obstacles (Steps, Grade Change) _____

Problems _____

Fax Information Back to:

Eric C. Riethmiller

Fax (215) 533-8907

Email: Eriethmiller@ptrco.com