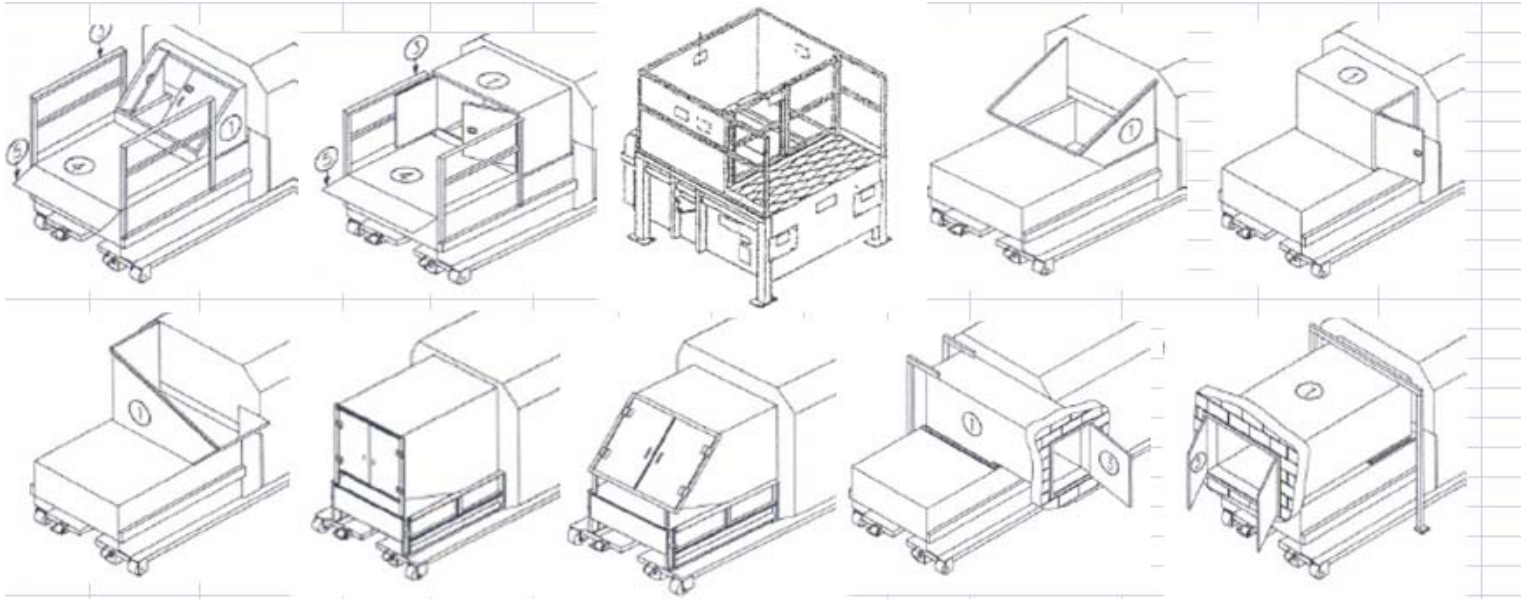


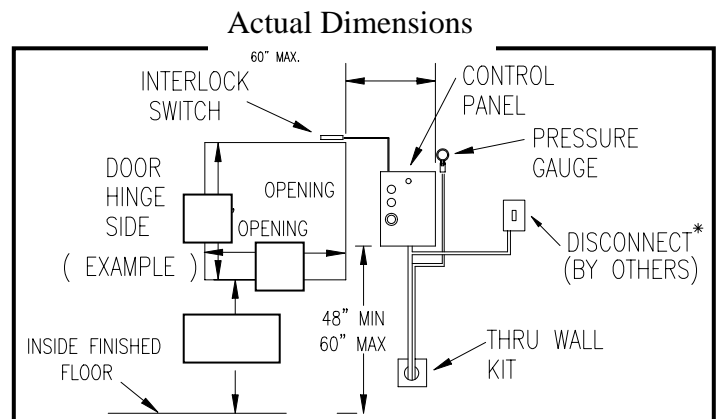
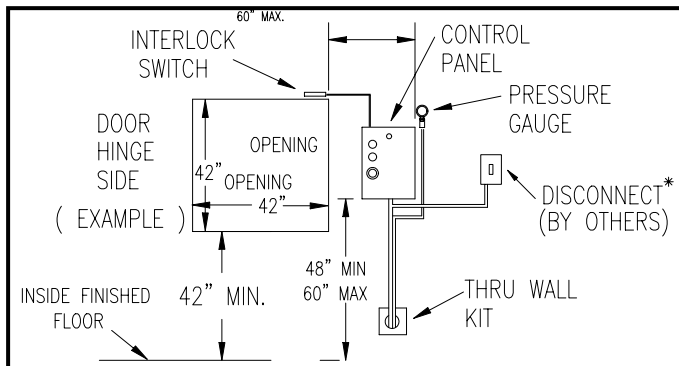
PTR Baler & Compactor Company

Stationary or Self-Contained Compactor SURVEY INFORMATION

Circle the hopper configuration below:



1. Surveyor's Company Name _____ Site Name _____
2. Surveyor _____ Phone # _____ Instal. Quote _____
3. Model to be installed _____ Voltage Available _____
4. Is there a removal Y / N Is there a concrete pad Y / N Rough Opening Y / N
5. Pad width _____ Pad Length _____
6. Inside View: Please fill in picture to the left for a thru the wall chute. Please note if a disconnect is supplied & voltage.



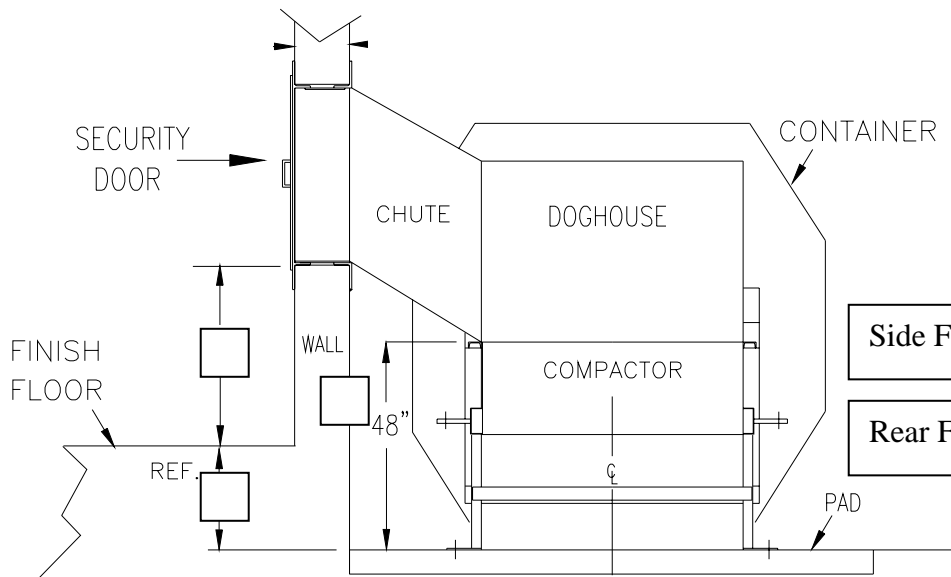
Notes: _____



PTC Compactor Survey Form Pg2

Customer Name: _____

7. Sketch Side View showing wall, docks, unit in position, posts, objects in area with dimensions.



Digital Photo's are encouraged.

Side Feed (left shown) **L / R**

Rear Feed **Yes / No**

Notes Side View: _____

8. If Applicable, List:

a. Dock Height _____ Width _____ Length _____ Roof Height _____

Notes Dock View: _____