



Curved Stairlift Survey Form

Part A: General information								
1. Survey date		2. Surv	eyor Nam	e				
3. Camera survey		4. First		Yes □	No□			
☐ ref # (MU00XXX)		insta	allation?					
5. Company name				- 1				
6. Contact person		7. Phor	ne numbe	r				
8. Email address				- 1				
9. Invoice address		10. Deliv	very addre	ss (if differer	nt from invoice address)			
Street		Street		,				
Apt #	Apt#							
City	City							
State	•			State				
Zip		Zip						
·								
11. Shipping instructions								
Lift gate required?								
Residential delivery? $\ \Box$								
Call ahead delivery? $\ \Box$	Phone r	number						
Other? Please describe								
Part B: User information								
A: B: C: D: Weight: Height:	B: Inches C: Inches D: Inches Weight: LBS			Customer name: Customer address Street Apt# City State Zip				
Part C: Track type (select one only)								
Standard (265lbs capacity)	Heavy duty (350lb	s capacity) Γ] [Outdoor (265	ilbs capacity)			
Standard (200100 capacity)	Treaty duty (050)		-	(
Part D: Options								
Upholstery color	Track color		E	xtra	Quantity			
□ Beige	□ Pure V	c	Charging station					
☐ Brown	☐ Oyster White			Remote				
□ Red	Silk Grey			ttendant cor	ntrol			
☐ Dark Brown		Brown						
(If none selected, Beige will be applied)	_							
(☐ Jet Bla	ICK						





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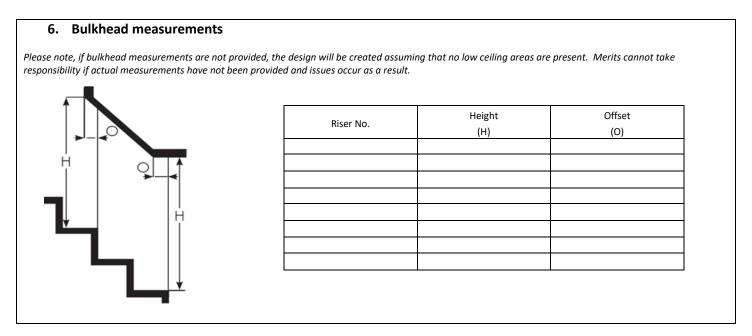
Part D: Site information							
1. Key measurements							
					tion, upper landin tion, Lower landin		_
		Number of	floors:				
A		Number of	Risers				
		Staircase v	vidth (n	arrowest po	int):		
		Riser heigh	nt:				
В		Tread dept	:h:				
	t Section	2 nd Section		3 rd Section	4 th Section	5 th Section	¬
1	Section	2 nd Section		314 Section	4 ^{ai} Section	5" Section	-
Height of 1st Stair							
Nose-to-Nose Distance							
2. Power supply location			3.	Staircase	construction		
☐Upper landing				\square Wood			
☐ Lower landing				\square Concre	te		
☐Mid landing			□Steel				
Distance to outlet? (ft)			□Marble				
				\square Other			
4. Will the hand rails (lift side) be removed?		ed?	5. Will the hand rails (opposite side) be removed?				
□Yes			□Yes				
☐No Handrail width (to wall)?				\square No	Handrail width (to	o wall)?	

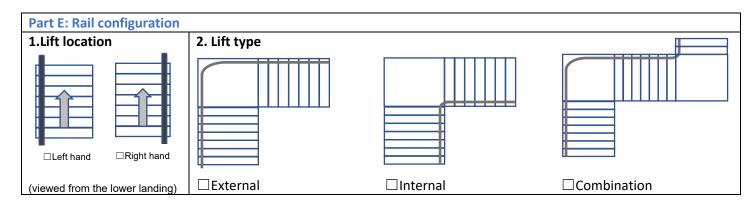
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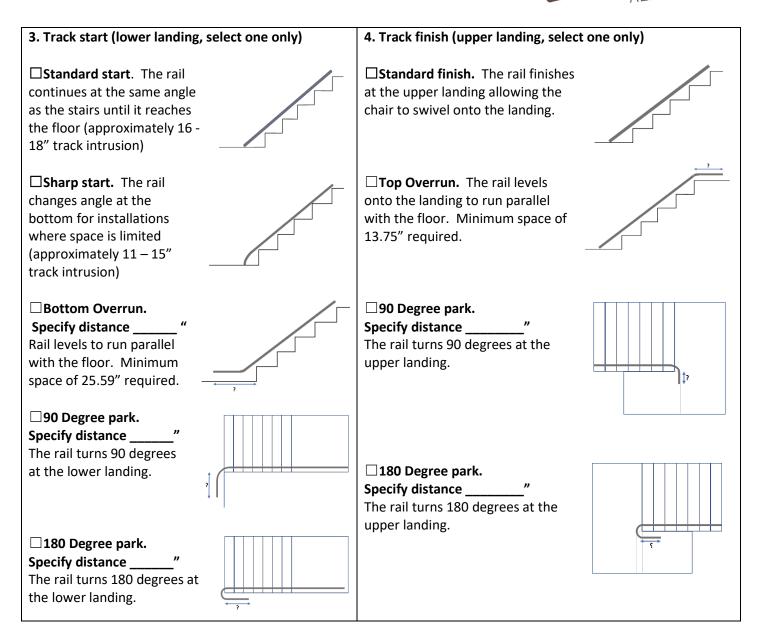


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Pint KEEP MOVING

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Part F: Supporting information

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Please describe any modifications to the staircase that will take place prior to the installation.					
Sketch					

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