

MATRIX FITNESS DELIVERY SITE SURVEY

Facility Name: _____ On-Site Contact: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Facility Phone: _____ Cell Phone: _____

Email: _____ Other: _____

Please answer the following questions with accurate information to ensure proper delivery and installation of Matrix Fitness equipment. Inaccurate information may result in delays and additional charges.

Is this a business site or residential site? BUSINESS RESIDENTIAL

Is the site new construction or an existing facility? NEW EXISTING

What are the hours the site will be open for delivery? _____ AM to _____ PM

Can your street accommodate and park a semitrailer (Length of up 75', Height 13'6")? YES NO

How close can semitrailer get to the delivery entrance? _____ FEET

Is there a loading dock? YES NO

Is this a ground level delivery? YES NO

If no, how many stairs to the equipment room? _____

What is the width of the smallest stairway? _____ INCHES

Is there a freight elevator available for delivery purposes? YES NO

If yes, what are the dimensions in inches? _____ L x _____ W x _____ H

What is the width and height of the entry door(s) in inches? _____ W _____ H

If double doors, can the center post be removed? YES NO

What are the width and height of the doors to the equipment room(s) in inches? _____ W _____ H

What is the distance from the entry doors to the equipment room? _____ FEET

What type of facility flooring will the equipment be placed on? _____

Are there dedicated (non-looped ground) electrical outlets installed? YES NO

Are there cable jacks installed? (only necessary for cardio pieces with TV's) YES NO

Is there anything unusual about your facility or location that could impede this installation?

By signing below, you are stating that the above information is correct. You will be responsible for any additional charges that result from inaccurate or incomplete information.

Authorized Signature

Print Name

Date

Title