Product Assessment Sheet

for Vacuum Lifting Company

Customer Name _____

Address _____

_____

Phone _____

Contact/Title _____

Brief description of your lifting application

_____

_____

_____

_____

Lifting Equipment

	☐ Forklift	☐ Crane	☐ Excavator	☐ Skid Steer	☐ other _____
Types	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
Capacities	_____	_____	_____	_____	_____

Power Supply Volt & Phase or Battery Powered? _____

Material Type ☐ Granite ☐ Marble ☐ Natural Stone ☐ Concrete ☐ Other _____

also glass, metal, wood, plastic…

Material Dimensions

Material, *if different*	**Width**	**Length**	**Depth**	**Weight**	**Surface**, *if different*

Surface Description ☐ Polish ☐ Rough Surface ☐ Natural ☐ Other _____

Lift Height _____

Comments: