

Prospect Information Form (PIF)



Representative Information:

Agent Name:

Date:

Email:

Phone #:

Client Information:

Company:

Contact Name:

Email:

Phone #:

Billing Address:

Installation Address:

Tax Status

- C Corporation Trust / Estate Partnership Non-profit
 S Corporation LLC Individual/Sole Proprietor Public

Restriction on working hours? Y N Installation deadline? Y N If YES, when?

Union labor required? Y N

Does your client want to collect rebate incentives? Y N

Permit required? Y N

Client's Utility Provider:

Facility Type:

Utility Account #:

Project Description: *Please attach the product specifications.*

Attachments

****Please allow a minimum of 48 hours for quote turnaround time.****

- Product Spec Sheets Client's Facility Layout/Floorplan Pictures of Jobsite

Send Completed Form to AJ Dobson at adobson@verdesolutions.com