

MARKETING/PROJECT ENTRY FORM

Date: ____/____/____ Salesman: _____

Phoned In Referral Faxed in Walked in Cold Call Voice Mail Existing Customer

What is your Company Name: _____

What is your Name: _____ Title: _____

What is your Address: _____

What is your City: _____ State: _____ Zip Code: _____

What is your Home #: () _____ - _____ Fax #: () _____ - _____

Office #: () _____ - _____ Pager #: () _____ - _____

Mobile #: () _____ - _____ Email: _____ @ _____

Website: _____

How did you find out about us? ARCAT Florida Design Other _____ Sweets System
 Architectural Digest House & Garden Period Homes Traditional Building
 Elle Décor Internet/Website Southern Accents Veranda
 Fine Home Building Old House Interiors Magazine Issue Date: _____

Are you: End User Are you building right now? Yes No Remodeling/Renovating

Sounds like a big project. _____ square feet What style? Stucco Dri-vit Masonry Other _____

Are you: Architect Builder/Contractor Landscape Architect Designer Mason
 Developer Interior Designer Reseller Other: _____

Is your work mostly: Commercial ____% Residential ____% Other: _____

CAN YOU SEND PLANS?

Are you currently working on a project? Yes No

What phase are you in? Planning Foundation Framing

May I have the project name for reference? _____

What is the project address? _____, _____, _____, _____
(Street Address) (City) (State) (Zip Code)

In what areas will you be using cast stone? _____

Project Action to be scheduled: Register Project Bid Preparation Contact Client Other: _____

Client Rating: **1** = Low Prob Buy **2** = Med Prob Buy > 90 days **3** = Med Prob Buy < 90 days
4 = High Prob Buy > 90 days **5** = High Prob Buy < 90 days

Stone Legends Catalog Stone Magic Catalog Samples Other _____
 Stone Origins Catalog Business Card References

NOTES: _____