



Agent Information

Agency Name	Sales Agent Name
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Customer Information

Company Name		
Address		
City	State	Zip
Company Contact	Email	Phone Number

Project / Worksite Information

Name			
Address			
City	State	Zip	Country
Contact	Phone number	Fax Number	

Billing Information

Name	Rev.IO Account Number (Existing Customer)	
Address		
City	State	Zip
Attention	Phone number	Fax Number

CONTINUE TO PAGE 2 QUESTIONNAIRE



Project Planning Questionnaire

This simple questionnaire will help the Comm-Core team guide you to the appropriate solution for your project.

1. Business Type? ☐ Restaurant/Bar ☐ Salon ☐ Bank ☐ Office
2. Viewing type? ☐ Public ☐ Employee Only
3. How many TVs will feature programming? _____
4. Specified Channels to include? _____
5. Specified Channels to exclude? _____
6. Receiver Type? ☐ HD ☐ HD DVR
7. Would the client like Music Channels? ☐ Yes ☐ No
8. Sports Packages? ☐ NFL Sunday Ticket ☐ MLB ☐ NBA ☐ NHL

*Please note for DirecTV service, we are only licensed to do commercial properties- No residential or multi-dwelling buildings

Please remit to your Comm-Core sales representative or quotes@comm-core.com.

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