



PID
FLOORS

Sales Form

Date: _____

Salesperson: _____

Referred by: _____

Previous Customer? _____

Client Trade?

Name: _____

Organization/Company: _____

Phone: _____ Cell Phone: _____

Email: _____

Address: _____

Architect: _____

Designer: _____

GC: _____

Installer: _____

Notes:

Project

Project Name: _____

Project Type: _____

Project Address: _____

Timeline of Project: _____

Project Scope: _____

Floors interested:

_____	_____
_____	_____
_____	_____
_____	_____

Samples Taken:

_____	_____
_____	_____
_____	_____
_____	_____

Samples Needed:

_____	_____
_____	_____
_____	_____
_____	_____