

1. Fill out questionnaire  
 2. Take a photo OR scan, and send to us via one of these options:  
 email: CandM@allenintl.net  
 text: photo to 1-208-520-8222  
 fax: to 1-801-794-0554  
 3. We will notify a dealer in your area to get a quote prepared for you.



**WHICH IS THE RIGHT TRANSPLANTER FOR YOU?**  
**CUSTOMER QUESTIONNAIRE**

*This information will help us to determine which model of transplanter will produce the best results for your transplanting requirements.*

**1.** Please specify the types of crops to be planted with this transplanter?  
 \_\_\_\_\_

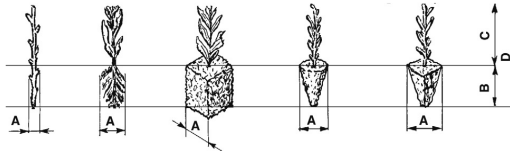
**2.** Kind of plants used and cell size? **(Circle the relative plant)**

**A** = in. \_\_\_\_\_

**B** = in. \_\_\_\_\_

**C** = in. \_\_\_\_\_

**D** = in. \_\_\_\_\_



**3.** Which kind of trays are you using? (hard, soft, number of holes,...)  
 \_\_\_\_\_

**4.** Are you planting on raised beds or on flat soils?  
 \_\_\_\_\_

**5.** Are you planting on plastic mulch? \_\_\_\_\_

**6.** Which kind of soil do you have? \_\_\_\_\_

**7.** Distance between rows? \_\_\_\_\_

**8.** In-row spacing? \_\_\_\_\_

**9.** Number of rows to plant? \_\_\_\_\_

**10.** Is there in the ground residual of previous cultivation?  
 \_\_\_\_\_

**11.** Do you wish to distribute granular fertilizer when transplanting? \_\_\_\_\_

**12.** Do you wish to distribute granular insecticide when transplanting? \_\_\_\_\_

**13.** Do you wish to distribute water when transplanting? \_\_\_\_\_

**14.** How many acres for each transplanting season? \_\_\_\_\_

**15.** When in the year do you begin to transplant? \_\_\_\_\_

Miscellaneous information \_\_\_\_\_

COMPANY \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL \_\_\_\_\_

CUSTOMER NAME \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_

**Please complete questionnaire and email to CandM@allenintl.net or fax to 801-794-0554. Thank you.**