### refrigerators and freezers

# Please return completed site survey to customerservice@follettice.com along with your purchase order to prevent a delay in order processing.

Does the site have any requirements regarding proof of COVID-19 vaccination or proof of a negativeCOVID-19 test within 48 hours of entry into the premises for contractors?Yes ()No

#### Authorized installation and start-up

This form is required to help ensure smooth delivery and installation of your equipment. Please complete this checklist for each piece of equipment being installed and return as soon as possible. Follett Authorized Delivery and Installation cannot be offered without a completed and signed Site Survey.

#### Service and charges approved by

| Printed Name                         | Signature        |        | Date  |  |
|--------------------------------------|------------------|--------|-------|--|
| Contact at delivery site             |                  |        |       |  |
| Printed Name                         | email            |        | Phone |  |
| Customer purchase order num          | ıber:            |        |       |  |
| Follett quote number (if availa      | able):           |        |       |  |
| Installation address                 |                  |        |       |  |
| Name of Facility:                    |                  |        |       |  |
| Street Address:                      |                  |        |       |  |
| Suite/Floor:                         |                  |        |       |  |
| City:                                |                  | State: | Zip:  |  |
| Additional site information to assis | t delivery team: |        |       |  |
|                                      |                  |        |       |  |
|                                      |                  |        |       |  |

## Site-specific survey questions for installation

## Receiving

| ١.                   | Is the facility tractor-trailer accessible?  |  |  |   | es () No ()   |
|----------------------|--|--|--|---|---|
| 2.                   | Will a tractor-trailer be able to stay in  | its parked location w  | ithout creating iss  | ues? Ye   | es $\bigcirc$ No $\bigcirc$                               |
| 3.                   | Is there a shipping/receiving dock at t  | he facility?   |  | Ye  | es 🔿 No 🔿   |
| 4.                   | Is the shipping/receiving dock tractor-  | -trailer accessible?   |  | Ye  | es 🔿 No 🔿   |
| De                   | livery   |  |  |   |   |
| 5.                   | Do you require a specific delivery wind  | dow? (Additional cha   | rges will apply).  | Ye  | es $\bigcirc$ No $\bigcirc$                               |
| 6.                   | Are there any obstructions or required   | security clearances f  | rom the delivery si  | te to the   |   |
|                      | point-of-install site (delivery path)?   |  |  | Ye  | es 🔿 No 🔿   |
| 7.                   | Are there any turns along the delivery   | path?  |  | Ye  | es 🔿 No 🔿   |
|                      | If yes, confirm unit(s) will fit around an   | ny corners.  |  |   |   |
| 8.                   | Are there any stairs/steps along the de  | elivery path?  |  | Ye  | es 🔿 No 🔿   |
| 9.                   | How many doorways are along the de   | livery path (upright r   | models only)?  |   |   |
|                      | Provide the dimensions of each doorw   | vay (including obstrue   | cting hardware) (ir  | nches):   |   |
|                      |  |  |  |   |   |
|                      |  |  |  | 14/   |   |
|                      | W xH   | W x  | Н  | W x   | Н   |
|                      |  | W x<br>W x   |  |   |   |
| 10                   |  | W x  |  | W x   |   |
| 10                   | . Will use of an elevator be required to i   | W x<br>install the unit?   | Н  | W x<br>Ye   | Н   |
|                      | . Will use of an elevator be required to i<br>Freight Elevator? Yes 〇 No 〇   | W x<br>install the unit?<br>Dimensions:  | Н  | W x<br>Ye   | Н   |
| 11                   | W xH<br>. Will use of an elevator be required to i<br>Freight Elevator? Yes ○ No ○<br>. What type of flooring will the unit be   | W x<br>install the unit?<br>Dimensions:<br>installed on?   | Н  | W x<br>Ye   | H<br>es () No ()  |
| 11<br>12             | W x H<br>. Will use of an elevator be required to i<br>Freight Elevator? Yes ○ No ○<br>. What type of flooring will the unit be<br>. Will the unit be installed on top of a p  | W x<br>install the unit?<br>Dimensions:<br>installed on?<br>latform?                                     | Н  | W x<br><br><br>Ye                                 | H   |
| 11<br>12<br>13       | W x H<br>. Will use of an elevator be required to a<br>Freight Elevator? Yes O No O<br>. What type of flooring will the unit be<br>. Will the unit be installed on top of a p<br>. Please confirm that any existing units  |  | H  | W x<br>Ye<br><br>Ye<br>on location. Ye            | H   |
| 11<br>12<br>13<br>14 | W x H<br>. Will use of an elevator be required to a<br>Freight Elevator? Yes No O<br>. What type of flooring will the unit be<br>. Will the unit be installed on top of a p<br>. Please confirm that any existing units<br>. Ceiling height where equipment will b   | W x<br>W x<br>Dimensions:<br>installed on?<br>latform?<br>have been relocated<br>be installed (upright r | from the installation  | W x<br>Ye<br><br>On location. Ye                  | H<br>H<br>No O<br>No O<br>es O                            |
| 11<br>12<br>13<br>14 | W x H<br>. Will use of an elevator be required to a<br>Freight Elevator? Yes No .<br>. What type of flooring will the unit be<br>. Will the unit be installed on top of a p<br>. Please confirm that any existing units<br>. Ceiling height where equipment will k<br>. If available, please submit the following                                |  | from the installation<br>models only)?<br>f this completed do                | W x<br>Ye<br>on location. Ye<br>cument (upright r | H<br>es () No ()<br>es () No ()<br>es ()<br>models only): |
| 11<br>12<br>13<br>14 | W x H<br>. Will use of an elevator be required to a<br>Freight Elevator? Yes No<br>. What type of flooring will the unit be<br>. Will the unit be installed on top of a p<br>. Please confirm that any existing units<br>. Ceiling height where equipment will b<br>. If available, please submit the following<br>1. Photo of install footprint |  | from the installation<br>models only)?<br>f this completed do<br>y(s) 3. Pho | W x<br>Ye<br>on location. Ye<br>cument (upright r | H<br>es () No ()<br>es () No ()<br>es ()<br>models only): |

### Authorized Installation

16. What type of electrical outlet<sup>\*</sup> do you have in the footprint? 15 A  $\bigcirc$  20 A  $\bigcirc$ 

\* **DEDICATED CIRCUIT REQUIRED**. 15 Amp dedicated circuit required for all compact refrigerators and freezers, and single door upright refrigerators. 20 Amp dedicated circuit required for all single door upright freezers and double door upright refrigerators.

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