

FLOOR TECH LTD.
Greg Rietdorf
9320 Sugar Mill Drive
Fort Wayne, IN 46835
(312) 788-9082 Fax (260) 486-7644

SERVICE REQUEST

Agreement # _____
Request Date: _____

Requested by _____
Title & Firm _____
Service Location _____

Contact Phone # _____
Alternate Phone # _____
Email Address _____

Billing Address (if different from service location)

REQUESTED SERVICE(S)

_____ *INSPECTION* *fee quoted:* _____

_____ *CONSULTATION* *retainer quoted:* _____

_____ *EXPERT TESTIMONY* *deposit quoted:* _____

_____ *OTHER* _____

ATTACHMENT? Y N

By signing below, Consultant is authorized to perform the specified services. It is understood that the services requested may involve investigation, research and various other work time and expense items relating to the services, but not itemized in this Request. It is also understood that Consultant may incur necessary expenses that are related to the services but not itemized in this Request.

By signing below, it is understood that this Service Request becomes part of the Agreement relating to this matter and all work charges and expenses relating to this request are agreed to be paid, whether specified in this request or not.

Signed _____ Date _____

Printed Name _____