SHERWOOD TOWER SERVICE SALES CALL REPORT

Station Name: _____ **Phone:** _____

Address: _____ **Fax:** _____

_____

City: _____ **State:** _____ **Zip:** _____

E/M address:_____

Contact Person: _____ **Group:** _____

cell phone:_____

Budgeted: 1ST 2ND 3RD 4TH QTR **Number of Towers:** _____

Height:	_____	_____	_____	_____	_____
Face:	_____	_____	_____	_____	_____
Last Paint	_____	_____	_____	_____	_____
Last Guy:	_____	_____	_____	_____	_____
Condition:	_____	_____	_____	_____	_____
Elevated:	_____	_____	_____	_____	_____
Congested:	_____	_____	_____	_____	_____
Guy Levels:	_____	_____	_____	_____	_____
Double Guys:	_____	_____	_____	_____	_____
Solid Wires:	_____	_____	_____	_____	_____
Insulators:	_____	_____	_____	_____	_____
Treatment Kind:	_____	_____	_____	_____	_____
Other:	_____	_____	_____	_____	_____
Night Work:					
How Tower loaded:					

Favoring Anyone:

Transmitter Site:_____

NOTES:

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