

Auto-Hite Cart -SCSC-2000-4242

Inquiry Date: _____ Due Date: _____

Contact: _____

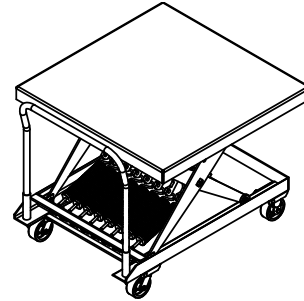
Company: _____

Phone: _____

Fax: _____

E-mail: _____

PREVIOUS ORDER NUMBER OR
QUOTE NUMBER, IF APPLICABLE:



PLATFORM SIZE

Standard

Overall Width: _____

Overall Length: _____

Usable Width: _____

Usable Length: _____

Cart Requirements:

Standard

Caster Size: _____

Caster Material: _____

Caster Brakes: _____

Deck Material: _____

Service Range: _____

Push Handle: _____

Stationary: YES/NO

Wash Down: YES/NO

Food Application: YES/NO

PRODUCT INFO

Load / Product type:

Basket / Pallet / Gaylord / Skid

Other: _____

Product Size:

Length: _____

Width: _____

Height: _____

Does container have feet? _____

Does container have drop sides? _____

Yes / No

Application / Loading Info:

Application Information:

Number of shifts: _____

Special Temperature requirements: _____

Side Loading: _____

Special Loading and Unloading Requirements: _____

Special Paint: _____ RAL# _____

Additional Notes: _____

Quote options:

_____ Exactly as specified _____ Cheapest / Closest to Vestil standard

_____ Quickest to ship

Requested Delivery Date: _____

*All options may not be available on all models

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