

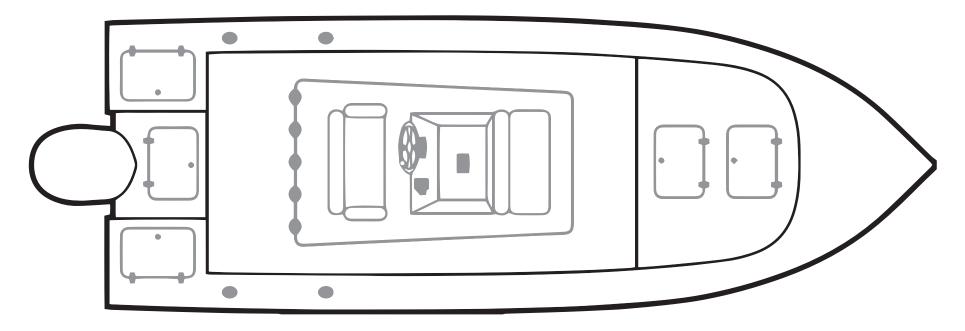
Name:	Phone:	Email:

Address: _____ Year/Make/Model: _____

Date: ______ Deposit: _____ Install Date: _____

Battery Subwoofer

Front Speaker



Rear Speaker

Head Unit

Tower System

Wire Kit Amplifiers



Take deposit and schedule	e install. Installation date:_		
Vehicle check-in list.			
Installation completed.			
Get social-media permissi	on.		
Give literature with sugges	ted upgrade.		
Schedule 30 day system i	nspection. Date:	_	
Send "Thank you." Date:_			
Contact customer 3 days	after install to verify syster	m status. Date:	_
Call customer 7 days befo	re system inspection and	confirm appointment.	
Date:			
System inspec	cted by,	Date:	
Upgrade path	reminder		
Ask for social-	media review		
Notes			