

# SURVIVOR OTR-IMS Application Checklist



Dealer Company Name : \_\_\_\_\_ Sales Person : \_\_\_\_\_

Rice Lake Customer Number : \_\_\_\_\_ Email : \_\_\_\_\_

Phone : \_\_\_\_\_ Address : \_\_\_\_\_

City : \_\_\_\_\_ State : \_\_\_\_\_ Zip : \_\_\_\_\_

Existing Truck Scale Length : \_\_\_\_\_

Wheelbase Length of Shortest Vehicle : \_\_\_\_\_

Wheelbase Length of Longest Vehicle : \_\_\_\_\_

Average Transactions Per Day : \_\_\_\_\_

Hours of Operation Each Day : \_\_\_\_\_ Days of Operation Per Week : \_\_\_\_\_

Average Time Vehicle is on Scale : \_\_\_\_\_

Existing Truck Scale Model and Brand : \_\_\_\_\_

Existing Digital Weight Indicator Model and Brand : \_\_\_\_\_

Existing Ticket Printer Model and Brand : \_\_\_\_\_

Existing Remote Display Model and Brand : \_\_\_\_\_

Existing Stop/Go Light :  Yes  No

Existing Ticketing Process :  Manual  Indicator  PC Software

Existing Vehicle Identification System :  Attendant  RFID  Camera

Existing License Plate Recognition System :  Yes  No