

7306 Driver Road ● Berlin Heights, OH ● 44814 (419) 588-2796 ● www.AutoGate.com

Installer Qualification Form

Thank you for your interest in becoming a factory certified installer.

Please answer the questions below and email them to

AdminDept@AutoGate.com.

Со	mpany Name: Date:	
Со	ntact Name:	
	ess: State: Zip:	
Ph	one #:	
En	nail Address:	
	voicing/Bill-To Address:	
We	ebsite Address:	
1.	How did you hear about this training?	
2.	How long has your company installed gate operators?	
	\square < 3 years \square 4 – 6 years \square 7 - 9 years \square > 10 years	
3.	How many gate operators does your company install per year? Include all swing, slide,	
	barrier and VPG:	
	□ < 10 □ 11 - 50 □ >50	
4.	What markets does your company currently sell to (and ballpark % of business)?	
	□ Commercial % □ Residential % □ Mini Storage % □ Industrial %	
	□ Government % □ Other: %	

What manufacturer training have you received and what year did this take place:		
3. Does your company or individuals	s carry any specific certifications? (Examples: Certified	
·	er, Fire Alarm System Installer Certification, etc.)	
7. Please list the names and t-shirt s	sizes of those attending training:	
FOR OFFICE USE ONLY:		
NSM Reviewed:	Enter in JobBOSS:	
Price Category:	Mail / e-Mail information:	
Referred By:	File on Server S: drive:	
Update Website (if applicable):	Sales Rep that sent Qualification form:	
Comments/Notes:		