YOUR COMPLETE SATISFACTION IS OUR MAIN CONCERN!

To insure that we are continually improving our customer service, we depend on feedback from you. Please take a moment to answer the following questions. We value your opinion and thank you again for your purchase!

PLEASE CHECK ⇨	YES	NO
• Was everyone at the dealership helpful and courteous?	❑	❑
• Was your salesperson well-informed about the trailer(s)?	❑	❑
• Did the salesperson demonstrate how to operate any special features on your new trailer(s)?	❑	❑
• Would you recommend the dealership and trailers to others?	❑	❑

• How far did you travel to purchase this trailer(s)?_____
Dealership Name: _____ City _____ State _____

• How did you hear about our trailers? *(Please check one below.)*

❑ Newspaper: _____ ❑ Internet/Dealer Site: _____

❑ Phone Book:_____ ❑ Previous Customer: _____

❑ Magazine: _____ ❑ Other: _____

❑ Industry Publication: _____ _____

• Other Comments: _____

_____

Thank You For Your Time.
Felling Trailers, Inc.

WARRANTY REGISTRATION CARD

Model:_____ Serial #: _____

Original
Purchaser's Name: _____
First Middle Last

Address: _____
Street City State Zip Code

Purchased from Authorized Dealer: _____

_____

I have read and understand Warranty Policy printed in the back of the Felling Trailers Owner's Manual.

_____

Owner's Signature Date Purchased