



**Inter-Dimensional Technologies, Inc.**

P.O. Box 392  
Hop Bottom, PA 18824-0392

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*Better Technology...For A Better Life™*

## Technical Support/Installation Questionnaire

You can choose to leave your contact information blank if you wish to submit this questionnaire anonymously.

Company Name: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

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

\_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

1. How would you describe the information in our user's manual?

Excellent \_\_\_ Good \_\_\_ Average \_\_\_ Below Average \_\_\_ Poor \_\_\_

Additional Comment: \_\_\_\_\_

2. How would you describe our responsiveness to your telephone calls, e-mails, etc.?

Excellent \_\_\_ Good \_\_\_ Average \_\_\_ Below Average \_\_\_ Poor \_\_\_

Additional Comment: \_\_\_\_\_

3. How would you describe our personal one-to-one communications with you throughout the entire installation process?

Excellent \_\_\_ Good \_\_\_ Average \_\_\_ Below Average \_\_\_ Poor \_\_\_

Additional Comment: \_\_\_\_\_

4. How would you describe our technical knowledge during telephone calls, e-mails, etc. when assisting in the installation of the product?

Excellent \_\_\_ Good \_\_\_ Average \_\_\_ Below Average \_\_\_ Poor \_\_\_

Additional Comment: \_\_\_\_\_

5. What additional features or changes would you like to see in future versions of the product or in our technical support?

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6. Was the product found to be packed properly when the shipment was opened, so as to prevent damage during shipping?

Yes \_\_\_ No \_\_\_

Additional Comment: \_\_\_\_\_

7. In your opinion, were the mounting brackets strong enough to ensure stable mounting?

Yes \_\_\_ No \_\_\_

Additional Comment: \_\_\_\_\_

8. How easy was the process of aligning the sensor(s) and reflector(s)?

Very Easy \_\_\_ Easy \_\_\_ Average \_\_\_ Somewhat Difficult \_\_\_ Difficult \_\_\_

Additional Comment: \_\_\_\_\_

9. How would you describe our overall technical support to you and your company?

Excellent \_\_\_ Good \_\_\_ Average \_\_\_ Below Average \_\_\_ Poor \_\_\_

Additional Comment: \_\_\_\_\_

10. How would you describe the overall ease of installation of the product? (Please take into account the product itself, our technical support, helpfulness of the user's manual, etc.)

Very Easy \_\_\_ Easy \_\_\_ Average \_\_\_ Somewhat Difficult \_\_\_ Difficult \_\_\_

Additional Comment: \_\_\_\_\_

11. Approximately how long did the entire installation take?

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Additional Comment: \_\_\_\_\_

12. (RTC-P3 customers only) How would you describe the overall functionality of the transmission/graphing software? (Take into account the features, ease-of-use, ease-of-installation, etc.)

Excellent \_\_\_      Good \_\_\_      Average \_\_\_      Below Average \_\_\_      Poor \_\_\_

Additional Comment: \_\_\_\_\_

13. Can we use the information and/or comments that you provided in this questionnaire in our advertising?

Yes \_\_\_      No \_\_\_

If yes, can we include your name, title and/or company name?

Yes \_\_\_      No \_\_\_

14. Are there any companies that you think might benefit from the product that you installed? If so, would you be kind enough to list them below?

Company: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State, Zip \_\_\_\_\_

Company: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State, Zip \_\_\_\_\_

Company: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State, Zip \_\_\_\_\_

Company: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State, Zip \_\_\_\_\_

Signature: \_\_\_\_\_      Date: \_\_\_\_\_

You can mail the questionnaire to us at the address listed at the top of the first page, or fax it back to us at 570-289-0989. Thank you very much for taking the time to give us your opinions.