

Pre-Proposal Information Packet (PPIP)

Your Company's Name _____

Address _____

Phone: Day _____ Evening _____

Fax No _____ Best Time to Call _____

Type of Business _____

**Please give a good faith estimate as to amount of billable hours per week your company

Will need for security _____

Approx, how many guards per day will you need _____

Names and Titles of Contact Person 1st _____

2nd _____

Please give us (2) available dates and times for a proposal meeting; please allow enough time (approx. 15-20 min) for a meaningful and productive meeting.

First Date _____ Time _____

Second Date _____ Time _____

The name of the person or persons our representative or representatives will be meeting with

WHAT ARE YOUR COMPANY'S SECURITY NEEDS?

WHAT ARE YOUR REALISTIC OUTCOMES AND MEASURABLE RESULTS?

Use as much space as needed and feel free to use the backs of these pages if needed.

WHAT WOULD YOU LIKE TO TELL US ABOUT YOUR COMPANY / CORPORATION / INSTITUTION, THAT YOU WOULD WANT US TO KNOW?

HOW CAN WE BEST SERVE YOU? _____

Thank you for taking the time to fill out this pre-proposal information packet. We look forward to meeting and working with you.

Respectfully Submitted,

Director, *CEO*
Printac Limited.