BYTE RECOVER ENTERPRISES™ Scan Project Assessment Questionnaire

Last Name:			First Name:		
Address:		City:		State:	Zip:
Email:			Phone #:		
Date:	Project Name:			Project Site	:
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To receive a preliminary project plan and cost estimate, please return a completed assessment form to <u>robertd@byterecover.com</u> Photos of any boxes, file cabinets, or containers that currently store the target items can help determine project scope. Finally, include any notes or specific instructions; a response will be sent within 48 business hours. Thank You for Your Business!