

Please provide the following information for a quotation:

Organization: _____
Contact Name _____
Street Address _____
Address (cont.) _____
City _____
State/Province _____
Zip / Postal Code _____
Country _____
Phone no. _____
Fax No. _____
Email address _____

Let us help you with your crane application

Please tell us a brief description of your application (Example: Lifting and unloading propane tanks from a vehicle).

The Type of crane or auxiliary stabilizer you are interested in:

ANT _____ MAXILIFT _____ COBRA _____ MAXISTAB _____

The gross vehicle weight of the truck _____

Body Type : Pickup _____ Flatbed _____ Dump body _____ Van body _____
Other _____

The amount of reach (feet) per lifting (lbs)
_____ (Feet) _____ (Lbs)

How would you like it powered:

Manual _____ Electric/ hydraulic _____ Fully Hydraulic (PTO) _____

Type of Control –Manual _____ Cable- wanderlead _____ Radio remote _____

Please let us know the type of accessories (options) you would like for your crane:

Please let us know the type of stabilizers you would prefer

Manual extension out - Manual up and down _____
Manual extension out - Hydraulic up and down _____
Hydraulic extension out – Hydraulic up and down _____

Please let us know if you would like us to send to you our informational catalogue with a price booklet.

Yes _____ No _____