ALL TRAFFIC SOLUTIONS



Complete this form by typing your information into the editable PDF and printing, OR print the form and complete by hand. Be sure to sign.

- 1. Scan and email completed form to your ATS rep or FAX to (814) 237-9006
- 2. Once your request is authorized, you will be notified of the expected ship date (subject to availability).
- 3. Deploy the equipment using the instructions that will be provided
- Take advantage of complimentary remote TraffiCloud™ training
- 5. After the evaluation period, return all equipment by following the instructions that will be provided.

TRY TRAFFICLOUD™
FREE DURING YOUR
TEST DRIVE



TEST DRIVE FORM SPEEDLANE PRO

Contact Information

Name:	
Tit	le:
De	partment/Company:
Em	nail:
Ph	one:
Sh	nipping Information
De	partment/Company:
Att	tention:
Address:	
City, State, Zip:	
•••••	
Email:	
Phone:	
TI	ne Customer
1.	Agrees to use and evaluate the product as recommended by All Traffic Solutions and return within two (2) weeks.
2.	Acknowledges that if equipment is not returned or is damaged,
3.	customer will be invoiced up to the full purchase price. Agrees to complete a feedback form upon equipment return.

Signature

Your signature indicates agreement to the above terms.

Date