

Intercom, Video and Access Control Questionnaire

SSS SIEDLE

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DATE

NAME

COMPANY

ADDRESS

CITY STATE ZIP

PHONE

CELL

FAX

E-MAIL

PROJECT NAME/NO.

PROJECT LOCATION

CITY STATE ZIP

To help us specify the system that best fits your needs, please answer the following questions.

INTERCOM

1. Indicate which Siedle line and mounting system will be used at each entry station:

Line:
 Vario (V); Siedle Steel (S)

Mounting system*:
 Flush (F); Surface (S);
 Pedestal (P)

Entry Name	Line	Mount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. How many apartments have intercoms?

• How many are:

	Hands Free	Hand-Set
Surface mount	_____	_____
Desktop mount	_____	_____



3. Do any apartments have more than one (1) intercom station?

• How many apartments have two (2) intercom stations?

• How many apartments have three or more (3+) intercom stations?

4. Is there a concierge station?

• How is it mounted?

- Flush
- Surface
- Desktop
- PC

5. How many floors in the building have apartment intercom stations?

6. How many apartments are there per floor?



VIDEO

7. Is the video system

- Color or
- Black and white

8. How many entry stations have cameras?

• What type of camera(s)?

- Pan-Tilt Zoom or
- Fixed

9. How many other cameras are there that the apartment stations will call up?

- Garage _____
- Lobby _____
- Elevators _____
- Other _____

10. Will the entry station cameras tie into non-Siedle equipment, like a digital video recorder (DVR)?

* Not all mounting systems are available in all lines; please consult the catalog or your CSR.

