**Allied Digital Media**

**API FOR RECEIVING WEB LEAD**

**POST URL:** POST https://pro.allieddigitalmedia.com/api/rest/direct/add\_lead

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Fields (Required) | Data Type |
| "campaign\_id" | The Campaign ID of the Lead | Yes | String |
| “campaign\_key” | A string representing the Campaign key | Yes | String |
| “vendor\_id” | A string representing the Vendor Id | Yes | Integer |
| “is\_test” | Test Mode = 1 Live Mode = 0 | Yes | Integer |
| “first\_name” | A string representing the First Name of the Lead. | Yes | String |
| “last\_name” | A string representing the Last Name of the Lead. | Yes | String |
| “phone\_number” | A number representing the phone number of the Lead. | Yes | US Phone |
| “email” | A string representing the Email Address of the Lead. | Yes | String |
| “street” | A string representing the Street Name of the Lead. | Yes | US Address |
| “city” | A string representing the City of the Lead. | Yes | US City |
| “state” | A string representing the State code of the Lead | Yes | US State |
| “zipcode” | A string representing the Zip Code of the Lead | Yes | US Zip Code |
| 'service' | An Integer representing the service Id of the lead | Yes | Integer |
| 'SessionLength' | A string representing the time needed to fill in the data in the website | No | String |
| 'ip\_address' | An IP representing the IP address of the lead | No | IP Address |
| 'OriginalURL' | A string representing the URL of the website that came from the lead | No | String |
| 'browser\_name’ | A string representing the user browser | No | String |
| 'UserAgent' | A string representing the user browser | No | String |
| 'trusted\_form’ | A string representing the trusted form | Yes | String |
| “lead\_id” | A string representing the Jornaya Id | Yes | String |
| “is\_shared” | If Shared = 1, if Exclusive = 0, default 0 (Exclusive) | No | Boolean |
| “hash\_legs\_sold” | if shared is sent and ≠ 0 | Yes | JSON |
| “tcpa\_compliant” | Is lead TCPA compliant? If yes = 1 / No = 0(default) | No | Boolean |
| “tcpa\_consent\_text” | TCPA Consent Text | No | String |
| “sub\_id” | Sub ID | No | String |

* The data below represents the campaign ID and campaign Key:

1. **Campaign id = A1LL20I20ED199**
2. **Campaign Key = A1LL20I20ED199dig4ita44lmedi44a**
3. **vendor\_id = provided by Allied Digital Media**

* When sending a test lead, make sure to make the first name equals “test” or the last name equals “test” or is\_test equal 1 or both.
* Depending on ‘service’ the fields of the choice will be required.  
  example: if the ‘service’ was 2 and 2 represents solar, all of the fields required for solar will be mandatory to fill, and the other services fields will be optional.
* Header:

'Accept: application/json',

    'Content-Type: application/json'

* The table below represents the service and it’s ID:

|  |  |
| --- | --- |
| **Service Name** | **Service ID** |
| Window | 1 |
| Solar | 2 |
| Home Security | 3 |
| Flooring | 4 |
| WALK-IN TUBS | 5 |
| Roofing | 6 |
| Home Siding | 7 |
| Kitchen | 8 |
| Bathroom | 9 |
| Stairlifts | 10 |
| Furnace | 11 |
| Boiler | 12 |
| Central A/C | 13 |
| Cabinet | 14 |
| Plumbing | 15 |
| Bathtubs | 16 |
| Sunrooms | 17 |
| Handyman | 18 |
| Countertops | 19 |
| Doors | 20 |
| Gutter | 21 |
| Auto Insurance | 24 |

* The tables below represent the fields of each service and the data type of each field is integer because it represents the ID of each value.

\*Window Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| windows\_number | Number of windows | YES | String |
| project\_nature | nature of your project | YES | String |
| ownership | Do you own your home | YES | String |
| start\_time | Time to start project | No | String |

\*List Values\*

When posting leads, make sure you post the list value.

Number of windows

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | 1 | 1 |
| 2 | 2 | 2 |
| 3 | 3-5 | 3-5 |
| 4 | 6-9 | 6-9 |
| 5 | 10+ | 10+ |

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Install | Install |
| 2 | Replace | Replace |
| 3 | Repair | Repair |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*solar Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| power\_solution | Power Solution | YES | String |
| roof\_shade | Roof Shade | YES | String |
| monthly\_electric\_bill | Monthly Electric Bill | YES | String |
| property\_type | Property Type | YES | String |
| utility\_provider | Utility Provider | No | String |

\*List Values\*

When posting leads, make sure you post the list value.

Power Solution

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Solar Electricity for my Home | Solar Electricity for my Home |
| 2 | Solar Water Heating for my Home | Solar Water Heating for my Home |
| 3 | Solar Electricity & Water Heating for my Home | Solar Electricity & Water Heating for my Home |
| 4 | Solar for my Business | Solar for my Business |

Roof Shade

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Full Sun | Full Sun |
| 2 | Partial Sun | Partial Sun |
| 3 | Mostly Shaded | Mostly Shaded |
| 4 | Not Sure | Not Sure |

Monthly Electric Bill

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | $0 - $50 | $0 - $50 |
| 2 | $51 - $100 | $51 - $100 |
| 3 | $101 - $150 | $101 - $150 |
| 4 | $151 - $200 | $151 - $200 |
| 5 | $201 - $300 | $201 - $300 |
| 6 | $301 - $400 | $301 - $400 |
| 7 | $401 - $500 | $401 - $500 |
| 8 | $500+ | $500+ |

Property Type

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Owned | Owned |
| 2 | Rented | Rented |
| 3 | Business | Business |

\*Home Security Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| installation\_preferences | Installation Preferences | YES | String |
| lead\_have\_item\_before\_it | Do you have an existing alarm and/or monitoring system? | YES | String |
| property\_type | Property Type | YES | String |
| start\_time | Time to start project | No | String |

\*List Values\*

When posting leads, make sure you post the list value.

Installation Preferences

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Professional installation | Professional installation |
| 2 | Self installation | Self installation |
| 3 | No preference | No preference |

lead have item

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Property Type

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Owned | Owned |
| 2 | Rented | Rented |
| 3 | Business | Business |

\*Flooring Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| type\_of\_flooring | Type of Flooring | YES | String |
| project\_nature | Nature of your project | YES | String |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | YES | String |

\*List Values\*

When posting leads, make sure you post the list value.

Type of Flooring

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Vinyl Linoleum Flooring | Vinyl Linoleum Flooring |
| 2 | Tile Flooring | Tile Flooring |
| 3 | Hardwood Flooring | Hardwood Flooring |
| 4 | Laminate Flooring | Laminate Flooring |
| 5 | Carpet | Carpet |

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Install New Flooring | Install New Flooring |
| 2 | Refinish Existing Flooring | Refinish Existing Flooring |
| 3 | Repair Existing Flooring | Repair Existing Flooring |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Walk in Tubs Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| reason | Why Do You Want A Walk-In Tub? | Yes | String |
| features | What Are the Desired Features? | No | String |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Reason

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Safety | Safety |
| 2 | Therapeutic | Therapeutic |
| 3 | Others | Others |

Features

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Whirlpool | Whirlpool |
| 2 | Quick Water Release | Quick Water Release |
| 3 | Soaking | Soaking |
| 4 | Air/Hydro Massager | Air/Hydro Massager |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Roofing Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| roof\_type | Type of Roof | Yes | String |
| start\_time | Time to start project | No | String |
| project\_nature | Nature of your project | Yes | String |
| property\_type | What is the property type? | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Type of Roof

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Asphalt Roofing | Asphalt Roofing |
| 2 | Wood Shake/Composite Roofing | Wood Shake/Composite Roofing |
| 3 | Metal Roofing | Metal Roofing |
| 4 | Natural Slate Roofing | Natural Slate Roofing |
| 5 | Tile Roofing | Tile Roofing |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Property Type

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Residential | Residential |
| 2 | Commercial | Commercial |

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Install roof on new construction | Install roof on new construction |
| 2 | Completely replace roof | Completely replace roof |
| 3 | Repair existing roof | Repair existing roof |

\*Home Siding Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| type\_of\_siding | Type of Siding | Yes | String |
| start\_time | Time to start project | No | String |
| project\_nature | Nature of your project | Yes | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Type of Siding

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Vinyl Siding | Vinyl Siding |
| 2 | Brickface Siding | Brickface Siding |
| 3 | Composite wood Siding | Composite wood Siding |
| 4 | Aluminum Siding | Aluminum Siding |
| 5 | Stoneface Siding | Stoneface Siding |
| 6 | Fiber Cement Siding | Fiber Cement Siding |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Siding for a new home | Siding for a new home |
| 2 | Siding for a new addition | Siding for a new addition |
| 3 | Replace existing siding | Replace existing siding |
| 4 | Repair section(s) of siding | Repair section(s) of siding |

\*Kitchen Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| kitchen\_type | Type of kitchen | Yes | String |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |
| removing\_adding\_walls | Does your kitchen remodel require removing or removing any walls? | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Type of Kitchen

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Full Kitchen Remodeling | Full Kitchen Remodeling |
| 2 | Cabinet Refacing | Cabinet Refacing |
| 3 | Cabinet Install | Cabinet Install |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Removing/ Moving Walls

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Bathroom Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| bathroom\_type | Type of Bathroom | Yes | String |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Type of Bathroom

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Full Remodel | Full Remodel |
| 2 | Cabinets / Vanity | Cabinets / Vanity |
| 3 | Countertops | Countertops |
| 4 | Flooring | Flooring |
| 5 | Shower / Bath | Shower / Bath |
| 6 | Sinks | Sinks |
| 7 | Toilet | Toilet |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Stairlifts Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| stairs\_type | Type of Stairlifts | Yes | String |
| stairs\_reason | Reason for Stairlifts | Yes | String |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Type of Stairlifts

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Straight | Straight |
| 2 | Curved | Curved |

Stairlifts Reason

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Mobility | Mobility |
| 2 | Safety | Safety |
| 3 | Other | Other |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Furnace Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| furnace\_type | Type of Furnace | Yes | String |
| project\_nature | nature of your project | Yes | String |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Type of Furnace

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Do Not Know | Do Not Know |
| 2 | Electric | Electric |
| 3 | Natural Gas | Natural Gas |
| 4 | Oil | Oil |
| 5 | Propane Gas | Propane Gas |

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Install | Install |
| 2 | Replace | Replace |
| 3 | Repair | Repair |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Boiler Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| boiler\_type | Type of Boiler | Yes | String |
| project\_nature | nature of your project | Yes | String |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Type of Boiler

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Do Not Know | Do Not Know |
| 2 | Electric | Electric |
| 3 | Natural Gas | Natural Gas |
| 4 | Oil | Oil |
| 5 | Propane Gas | Propane Gas |

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Install | Install |
| 2 | Replace | Replace |
| 3 | Repair | Repair |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Central A/C Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| project\_nature | nature of your project | Yes | String |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Install | Install |
| 2 | Replace | Replace |
| 3 | Repair | Repair |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Cabinet Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| project\_nature | nature of your project | Yes | String |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Cabinet Install | Cabinet Install |
| 2 | Cabinet Refacing | Cabinet Refacing |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Plumbing Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| plumbing\_service | Plumbing Services | Yes | String |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Plumbing Services

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Faucet/ Fixture Services | Faucet/ Fixture Services |
| 2 | Pipe Services | Pipe Services |
| 3 | Leak Repair | Leak Repair |
| 4 | Remodeling/ Construction | Remodeling/ Construction |
| 5 | Septic Systems | Septic Systems |
| 6 | Drain/ Sewer Services | Drain/ Sewer Services |
| 7 | Shower Services | Shower Services |
| 8 | Sump Pump Services | Sump Pump Services |
| 9 | Toilet Services | Toilet Services |
| 10 | Water Heater Services | Water Heater Services |
| 11 | Water/ Fuel Tank | Water/ Fuel Tank |
| 12 | Water Treatment and Purification | Water Treatment and Purification |
| 13 | Well Pump Services | Well Pump Services |
| 14 | Backflow Services | Backflow Services |
| 15 | Bathroom Plumbing | Bathroom Plumbing |
| 16 | Camera Line Inspection | Camera Line Inspection |
| 17 | Clogged Sink Repair | Clogged Sink Repair |
| 18 | Disposal Services | Disposal Services |
| 19 | Excavation | Excavation |
| 20 | Grease Trap Services | Grease Trap Services |
| 21 | Kitchen Plumbing | Kitchen Plumbing |
| 22 | Storm Drain Cleaning | Storm Drain Cleaning |
| 23 | Trenchless Repairs | Trenchless Repairs |
| 24 | Water Damage Restoration | Water Damage Restoration |
| 25 | Water Jetting | Water Jetting |
| 26 | Water Leak Services | Water Leak Services |
| 27 | Basement Plumbing | Basement Plumbing |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Bathtubs Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

\*Sunrooms Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| start\_time | Time to start project | No | String |
| sunroom\_service | Sunrooms Service | Yes | String |
| property\_type | What is the property type? | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Sunrooms Service

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Build a new sunroom or patio enclosure | Build a new sunroom or patio enclosure |
| 2 | Enclose existing porch with roof, walls or windows | Enclose existing porch with roof, walls or windows |
| 3 | Screen in existing porch or patio | Screen in existing porch or patio |
| 4 | Add a metal awning or cover | Add a metal awning or cover |
| 5 | Add a fabric awning or cover | Add a fabric awning or cover |
| 6 | Repair existing sunroom, porch or patio | Repair existing sunroom, porch or patio |

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Property Type

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Residential | Residential |
| 2 | Commercial | Commercial |

\*Handyman Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |
| amount\_work | Amount Work | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Amount Work

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | A variety of projects | A variety of projects |
| 2 | A single project | A single project |

\*Countertops Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |
| countertops\_material | Countertops Materials | Yes | String |
| project\_nature | nature of your project | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Countertops Materials

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Granite | Granite |
| 2 | Solid Surface (e.g corian) | Solid Surface (e.g corian) |
| 3 | Marble | Marble |
| 4 | Wood (e.g butcher block) | Wood (e.g butcher block) |
| 5 | Stainless Steel | Stainless Steel |
| 6 | Laminate | Laminate |
| 7 | Concrete | Concrete |
| 8 | Other Solid Stone (e.g Quartz) | Other Solid Stone (e.g Quartz) |

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Install | Install |
| 2 | Replace | Replace |
| 3 | Repair | Repair |

\*Doors Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |
| number\_of\_doors | Number of doors | Yes | String |
| project\_type | Type of project | Yes | String |
| project\_nature | nature of your project | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Install | Install |
| 2 | Replace | Replace |
| 3 | Repair | Repair |

Type of project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Exterior | Exterior |
| 2 | Interior | Interior |

Number of doors

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | 1 | 1 |
| 2 | 2 | 2 |
| 3 | 3 | 3 |
| 4 | 4+ | 4+ |

\*Gutters Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| start\_time | Time to start project | No | String |
| ownership | Do you own your home | Yes | String |
| gutter\_material | Gutters Materials | Yes | String |
| project\_nature | nature of your project | Yes | String |
| ownership | Do you own your home | Yes | String |

\*List Values\*

When posting leads, make sure you post the list value.

Time to start project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Immediately | Immediately |
| 2 | Within 6 months | Within 6 months |
| 3 | Not Sure | Not Sure |

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Nature of your project

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Install | Install |
| 2 | Replace | Replace |
| 3 | Repair | Repair |

Gutters Materials

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Copper | Copper |
| 2 | Galvanized Steel | Galvanized Steel |
| 3 | PVC | PVC |
| 4 | Seamless Aluminum | Seamless Aluminum |
| 5 | Wood | Wood |
| 6 | Not Sure | Not Sure |

\*Auto Insurance Values\*

|  |  |  |  |
| --- | --- | --- | --- |
| Field | Description | Required | Data Type |
| car\_year | The year of vehicle (Length 4). | Yes | String |
| car\_make | The make of vehicle. | Yes | String |
| car\_model | The model of vehicle. | Yes | String |
| ownership | Do you own your home | Yes | List |
| birthday | Driver Date of Birth  YYYY-MM-DD | Yes | Date |
| gender | Driver Gender. | Yes | List |
| marital\_status | Driver marital status. | Yes | List |
| license | Driver license Status. | Yes | List |
| multi\_vehicles | Do you have more than one vehicle? | No | List |
| multi\_drivers | Is there more than one driver in your household? | No | List |
| insurance\_provider | Current insurance company. | No | String |
| driver\_experience | Are you a good driver? | No | List |
| number\_of\_tickets | Number of Driver Ticket. | No | List |
| DUI\_charges | Driver DUI status. | No | List |
| SR\_22\_need | Driver SR22 status. | No | List |

\*List Values\*

When posting leads, make sure you post the list value.

Do you own your home?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Driver Gender?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Male | Male |
| 2 | Female | Female |
| 3 | Non-Binary | Non-Binary |

Driver marital status?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Driver license Status?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Do you have more than one vehicle?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Is there more than one driver in your household?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Are you a good driver?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Driver DUI status?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Driver SR22 status?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | Yes | Yes |
| 2 | No | No |

Number of Driver Ticket?

|  |  |  |
| --- | --- | --- |
| # | Label | Value |
| 1 | 1 | 1 |
| 2 | 2 | 2 |
| 3 | 3 | 3 |
| 4 | 4 | 4 |
| 5 | 5+ | 5+ |