

MFP PRE-INSTALL SITE REQUIREMENTS



We thank you for your business and would like to make the delivery and setup of your new _____ a positive experience. To ensure this, we ask that you take a few minutes and provide us with some information to streamline the process. We ask that you send this information back to our IT team prior to scheduling delivery. We feel confident that the preparation beforehand eliminates unnecessary confusion during the setup. Thank you for your cooperation. If you have specific questions regarding any of the information, please contact our IT Team at Service@ipsLaserExpress.com.

REQUIRED	IN PLACE	
_____	_____	An active network Ethernet port within 10 feet of the unit's installation site
_____	_____	An active phone port within 10 feet of the unit's installation site
_____	_____	A 110v outlet with ground prong receptacle and less than 6 feet from the unit's location
_____	_____	IP Address: _____
_____	_____	Subnet Mask: _____
_____	_____	Gateway: _____
_____	_____	DNS Primary Address: _____
_____	_____	DNS Secondary Address (if applicable): _____
_____	_____	SMTP Address and associated user name / password (if necessary) _____
_____	_____	POP3 Address and associated user name / password (if necessary) _____
_____	_____	SMB Path to scan destination folder needs full read / write permission _____

We also require that someone from the IT Department be present during the installation or to be available by phone when the technician is on site to assist if there are any networking issues.

IT Department Contact Name / Phone Number _____

On site installation and preliminary training will take no longer than 90 minutes. If installation will take longer than 90 minutes due to issues resulting from IT problems, there will be a charge of \$150 an hour. Partial hours are charged as a full hour. The 90 minute installation window begins once the technician arrives with the unit.

Installation Date _____ Arrival Time _____ Completion Time _____

My signature below confirms that the equipment described above has been set up to my satisfaction and is working properly within the parameters of our office. We have scheduled the follow up training for:

Date: _____ Time: _____

Customer Signature _____

If you encounter any issues in the interim, please contact us to address the issue.

Thank you,