Stewart Business Systems- Print/Scan Network Survey ☐ SOLD ☐ DEMO

Company Name	Sales Representative	Date
Street Address *(each location requires separate form)*	Branch Location	Proposed Model(s)
City, State / Zip Code	Proposed Accessories	
MIS Contact Name / Telephone / Extension / Email or Fax		

Workstation Operating Systems (*DOS is not officially supported.*)

☐ Windows 95/98/ME Qty: ____ ☐ Windows XP Qty: ____ ☐ Unix / Linux OS Ver. _____ Qty: ____

☐ Windows NT Qty: ____ ☐ Windows 2000 Qty: ____ ☐ Apple OS Ver. _____ Qty: ____

☐ Peer to Peer [Windows SMB]

Printer Languages Used or Desired

☐ PCL Version: _____ ☐ Postscript Version: _____ ☐ Other Version: _____

Server Operating Systems (*Please note that our IT specialists are not certified or trained on Unix or Host systems.*)

☐ Windows NT Version 4
☐ Windows 2000
☐ Windows 2003

☐ Novell Netware Version: ____
☐ NDPS Version: ____
☐ Macintosh Version: ____

☐ Unix / Linux Mfr: _____ Version: _____
☐ AS/400 Version: ____
☐ Other: ____

Network Environment

☐ Dedicated electrical outlets and "live" network port near the equipment.
☐ Ethernet ☐10 ☐100 ☐1000
☐ Token Ring 4 / 16

☐ Parallel (limitations)
☐ USB (limitations)
☐ Other _____

☐ Wireless
IEEE Std Type _____
Access Points # _____

Protocols Used ☐ TCP/IP

Printer IP Address = ___.___.___.___
Optional Copier IP Address[1] = ___.___.___.___
Subnet Mask = ___.___.___.___
Gateway Address = ___.___.___.___
DNS Address = ___.___.___.___
(If scanning to FTP) FTP Address = ___.___.___.___
Email SMTP Server Address = ___.___.___.___

☐ IPX / SPX Type _____
☐ Bindery Context: _____
☐ NDS: _____
☐ Object Name: _____
☐ Other Protocol: _____

LDAP Address = ___.___.___.___

[1] *Only select models offer this feature.*

Customer MIS Admin Support

☐ Local
☐ Remote

Contact Name & No.

_____
_____
_____
_____

List Special Software Applications and Versions Used (Other than standard Microsoft Applications)

☐ Adobe _____	☐ Quark _____	☐ AutoCAD _____

Please complete this section for installing any type of scanning:

All manipulation software (Photo Shop, Acrobat, OCR) etc. will be provided or purchased by the customer.

Scanning Services to be installed (Check all that apply)

Does the MIS contact have administrative rights to this Network? ☐ Yes ☐ No

☐ Scan to e-mail
(*If email option is selected please indicate on-site or 3rd party provider*)
☐ In-house E-mail Server System _____
☐ Email provided by outside source _____
(*Static IP email server required & anonymous email acceptance may be required*)

[2] *Customer must have FTP services running on their network.*

☐ Scan to FTP [2]
☐ Scan to Folder-SMB
☐ Scan to Mailbox-HD
☐ Scan via TWAIN
☐ Scan to Copier HD

Please select any features you would like to learn about or if possible, have activated:

☐ Print Tracking ☐ Desktop Faxing ☐ Tab Printing ☐ MailMerge Printing
☐ Copy Tracking ☐ Fax Cover Sheets (Desktop) ☐ Mixplex Printing ☐ Secure / Private Printing

THIS FORM MUST BE SUBMITTED AND APPROVED PRIOR TO DELIVERY AND INSTALLATION OF EQUIPMENT.

Customer's Signature _____ Name _____ Date _____