DELTA OMNI
BUSINESS SOLUTIONS
DIVISIONS OF COPY CORP, INC.

Network Connectivity Form

Contact Information:

Company Name:	_____	**Address:**	_____
Main Contact:	_____	**Main Phone #:**	_____
IT Contact:	_____	**IT Phone #:**	_____
Sales Rep:	_____	**Machine Type:**	_____

Network Environment:

Printer Auditing Requirements

☐ **fmaudit™** ☐ **# OF PRINTERS** TO BE COMPLETED BY SALES REP.

Hardware Requirements

All need to be done:

Wiring:	☐ Electrical Outlet ☐ Fax Line ☐ Printer Conn. (Cat5/6, USB, etc.) ☐ Wireless

Software Requirements

Select all that apply for *Device(s)* Installed:

Server Environment:	☐ Windows Server ☐ No Server ☐ Unix/Linux ☐ Novell ☐ Domain ☐ No Domain ☐ Windows Peer to Peer ☐ LDAP
Workstations Drivers:	# of Windows PC's_____ # of Macs_____ **Note: Basic install includes 5 workstations only (Drivers & Scans)**
Special Applications:	Please Explain: _____ _____
Installation Expectations:	☐ Network Printing ☐ Network Faxing ☐ Twain Scanning ☐ Scan to File (SMB) ☐ Scan to Email ☐ Scan to File (FTP) ☐ Fax Forward to File ☐ Fax Forward to Email ☐ Address Book Entry Other:
TCP/IP Settings:	Device IP Address_____ Subnet _____ Gateway_____ **Note: If more than 1 Device is being Installed, Provide All desired IP's in the Back of sheet.**
DNS Settings:	DNS 1 _____ DNS 2 _____ Domain Name_____
Device Email Settings:	SMTP Server _____Auth. Email_____Password_____ SMTP Port:_____Encryption: ☐ TLS ☐ SSL ☐ NONE

POWER REQUIREMENTS: Has electrical been done? ☐ Yes ☐ No **120V AC 60HZ 20A**

IRC5250, IRC5255, IR6255, IR6265, IR6275 MUST BE 20AMP DEDICATED

⚡⚡⚡⚡⚡⚡⚡**COPIERS OVER 75CPM REQUIRE SPECIAL 220V**⚡⚡⚡⚡⚡⚡⚡

For anything else not mentioned on Form Please contact: **Delta I.T / Service Dept. (954) 885-0102**