

Connectivity Questionnaire for all Commonwealth Networked Solutions

To Insure Proper Connectivity Complete ENTIRE Form and Return at least 3 Days Prior to Install Date

EMAIL Completed Form To: lab@comdos.com or FAX # 703-450-8770

Date Submitted _____ Sales Rep _____ Target Install Date _____

Customer Name _____

Street Address _____

City _____ State _____ Zip _____ Phone _____ Fax _____

Site Contact _____ Phone _____ Email _____

IT Contact _____ Phone _____ Email _____

IT Contact: On Site _____ Third Party _____ Third Party IT Co. Name _____

Proposed Equipment _____ Number of users to be serviced with new unit(s) _____

Primary network printing and scanning applications/Additional notes _____

Connectivity

Ethernet 10/100 10/100/1000

Wireless Technology Bluetooth 802.11a 802.11b 802.11g 802.11n

Other _____

Active network port in proposed location of connected device(s)? Yes No

DSL, T1, Cable or other static internet technology in use on LAN / WAN? Yes No

Server Operating System(s)

Windows Server OS _____ Service Pack _____ 32 bit 64 bit (Check One)

Windows Server OS _____ Service Pack _____ 32 bit 64 bit (Check One)

Novell Server OS _____ Mac Server OS _____

Client Operating System(s)

Win 2k Win XP Pro Vista Business Vista Ultimate Windows 7

Win '98 Win XP Home Vista Home Basic Vista Home Premium

MacIntosh OS Version(s) _____ List any others _____

64 bit Operating Systems _____

Related Connectivity Issues

Email Server on Site: Yes No If Yes, what version? _____

SMTP Server IP _____ POP Server IP _____

FTP Server on Site: Yes No If Yes, what version? _____

FTP Server IP _____

TCP/IP Address to be assigned to new equipment: (Address must be static or reserved)

IP Address _____ Subnet Mask _____

Gateway _____

DNS: Primary _____ Secondary _____

Desired Configuration

Methods of Printing: Shared from Server IP Direct USB

Methods of Scanning: Email FTP SMB Box/HDD WebDAV

Network Fax Options: PC Faxing Fax forward

Auditing / Account Codes for: Copying: B/W Color Printing: B/W Color

AMR (Automated Meter Reporting) Enrolled Yes No