

Print Management Site Survey™

Introduction

Thank you for your interest in purchasing print management and print vending software from Jamex. This document is designed to help us understand more about your network and user environment in order to tailor the correct print management solution for you.

Please fill this form out as completely as possible and return it to Jamex directly or to your local Jamex reseller.

Person Completing This Form

NAME
PHONE
EMAIL

End User Information

SITE NAME
STREET ADDRESS
CITY, STATE, ZIP
CONTACT NAME
CONTACT TITLE
CONTACT PHONE
CONTACT EMAIL
ILS VENDOR (IF LIBRARY)

Local Reseller Information

COMPANY NAME
STREET ADDRESS
CITY, STATE, ZIP
CONTACT NAME

CONTACT PHONE

CONTACT EMAIL

Building Information

In how many buildings will the print management software be used? _____

If there are multiple buildings, how are the buildings named/identified?

NAME(S) OF BUILDING

Print Release Terminal Information

How many print release terminals (points of sale) will there be in this system? _____ (Generally, each printer/output device represents a point of sale.)

If there are multiple buildings, please list the names of the buildings shown above and how many print release terminals will be in each building

NAME(S) OF BUILDING

PRINT RELEASE TERMINALS

Client Information

How many institution-owned (school or library owned) public computers will be printed from? _____

What operating systems are used on those public computers?

OPERATING SYSTEM(S)

What security measures are used on public computers?

SECURITY MEASURES

What applications are used on public computers?

APPLICATIONS

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If there are multiple buildings, please list the names of the buildings shown above and how many clients exist in each building.

NAME(S) OF BUILDING	# CLIENTS
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Will printing be required from non-institution-owned (student or patron owned) computers? _____ (Y/N)

If "Yes," how many concurrent users would you like to support? _____

Vending System Information

What types of payment would you like to accept for self service payment? (check all that apply)

Cash (coins & bills) _____

Stored-Value Cards _____

Printer Information

Please list the make and model of all printers to be used in this system. Please indicate whether PostScript drivers are available for each printer.

MAKE/MODEL	POSTSCRIPT CAPABLE (Y/N)
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