

Please answer all questions. Indicate N/A or None as appropriate
Email the completed form to NNE.Service@ricoh-usa.com

Section 1: Customer / Technical Contact Information

Account / Company Name: BOSTON COLLEGE Telephone: _____ Ext: _____
Address: _____ Suite / Floor / Bldg: _____
City / State / Zip: _____ IT Email Address: _____
IT Contact: _____ Telephone: _____ Ext: _____
Sales Rep: Joe Koslowsky Sales Rep's Phone number: 617-292-7555 x2646
Sales Rep's Email: joseph.koslowsky@ricoh-usa.com james.croke@ricoh-usa.com Sale Rep's Cell Number: 781-389-2683
Service Manager: Jim Basiliere

Section 2: Equipment Proposed


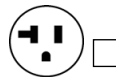
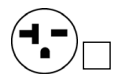


Proposed Model(s): _____ (Use complete model name (e.g. MP 3500, MP C3500, CL3500N))
Print Controller Proposed: _____ (Standard GW, Fiery, UC 6 Gold, etc.) Print Drivers Proposed: _____ (PCL, PS, RPCS, etc.)
Number of Clients to Setup: _____ Number of Servers to Setup: _____ Will the Customer be installing this device? Yes No

Section 3: Functionality Proposed

Doc Solutions: None Embedded @Remote DocumentMail PPDM eCopy Essentials (WG)
Print: None Basic Print Job Binding User Codes Secure Print Finishing Number to setup: _____
Fax: None LAN-FAX Forwarding IP-Fax Internet Fax Routing Number to setup: _____
Fax Forwarding: None To Email To Folder To FTP To Network (NCP) Number to setup: _____
Scan: None To Email To Folder To FTP To Network (NCP) TWAIN Number to setup: _____

Section 4: Power Outlets Provided by Customer (Please check all that apply)

Will there be Power Outlets available where the equipment is being installed? Yes No

 120V 15amp NEMA 5-15R  120V 20amp NEMA 5-20R  220V 20amp NEMA 6-20R  200V 15amp NEMA 6-20R  240V 30amp NEMA 6-30R

Section 5: Single Client Setup

N/A
Bluetooth Yes No Parallel Yes No USB Yes No Firewire Yes No Crossover Cable Yes No

Section 6: Network Operating Systems and Java to be supported

Will there be Network Port(s) and Cable(s) available where the equipment will be installed? Yes No N/A

| | | | | |
|---|--|------------------------------------|--|---|
| Server Environment: | | Network Protocol: | Network Type: | Java Enabled: |
| <input type="checkbox"/> Novell Network | <input type="checkbox"/> Macintosh OS 10.4+ | <input type="checkbox"/> TCP/IP | <input type="checkbox"/> Ethernet (CAT 5, 5e, 6) | <input type="checkbox"/> Java Card <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Windows NT | <input type="checkbox"/> Unix / Linux | <input type="checkbox"/> IPX/SPX | <input type="checkbox"/> Gigabit | Java Type _____ |
| <input type="checkbox"/> Windows 2000 | <input type="checkbox"/> Mainframe/AS400 | <input type="checkbox"/> NetBEUI | <input type="checkbox"/> 10/100 BaseT | |
| <input type="checkbox"/> Windows 2003/08 | <input type="checkbox"/> Citrix / Terminal Service | <input type="checkbox"/> DHCP | <input type="checkbox"/> Wireless | |
| <input type="checkbox"/> 64 Bit Computing | <input type="checkbox"/> Peer to Peer | <input type="checkbox"/> AppleTalk | | |

Section 7: Fax Network Information

Any VoIP Yes No Any VoIP Gateway / Server? Yes No Is the VoIP system compatible with T.38 (Fax over IP)? Yes No

Section 8: Wireless Network Interface

Wireless Type: None 802.11A 802.11B 802.11G 802.11N Other: _____
Wireless Encryption: None WEP WPA WPA2 Other: _____

Section 9: Client Operating Systems to be supported

Windows 2000 Pro Windows XP 64 Macintosh OS 9 Macintosh OS 10.6 Unix / Linux
 Windows XP Pro Windows Vista 32 Macintosh OS 10.0 to 10.1 Windows 9x/ME/NT Windows 7
 Windows XP Home Windows Vista 64 Macintosh OS 10.2 to 10.5 Other: _____

Section 10: Internet and Email Information (Required for Fax to Email and Scan to Email)

Connection to Internet: Dial-up DSL/Cable/T1/etc. Local Mail Server FTP Server
Requirements: Is Email server SMTP compliant? Yes No
 Is SMTP Authentication required? Yes No
 Will SMTP Server relay Email from the Ricoh device? Yes No
 Does the customer need LDAP search support? Yes No
Who is the Internet Service Provider? _____
SMTP Username: _____
SMTP Password: _____

Section 11: IP Addressing Requirements (Optional)

Model # _____ IP Address _____ Host Name _____ Gateway _____ SMTP _____
Subnet Mask _____ DNS1 _____
WINS Address _____ DNS2 _____
LDAP Address _____ POP3 _____

Signatures:

Customer Declines Network Connection? Yes No
Customer Approval: _____ Date: _____
Email completed form to: NNE.service@ricoh-usa.com