

Go to <https://profocus.epson.com> to submit installation and upload image/scan of this completed form.

**Customer Install Location Information**

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Contact Phone Number \_\_\_\_\_

Contact E-mail Address \_\_\_\_\_

**Installation Satisfaction Rating (CIRCLE ONE)**

(Unsatisfied) **1 2 3 4 5 6 7 8 9 10** (Satisfied)

Optional Comments \_\_\_\_\_

**Printer Information**

**Printer Model(s) Installed:**

<b>F-Series DTG</b>	<b>F-Series DS</b>	<b>V-Series</b>
<input type="checkbox"/> SCF3070	<input type="checkbox"/> SCF10070	<input type="checkbox"/> SCV7000
	<input type="checkbox"/> SCF10070H	

Printer Serial Number: \_\_\_\_\_  This unit is a demo

**Print Software Installed:**

<input type="checkbox"/> Epson Edge Print	<input type="checkbox"/> Wasatch	<input type="checkbox"/> Garment Creator
<input type="checkbox"/> ONYX	<input type="checkbox"/> ErgoSoft	<input type="checkbox"/> None
<input type="checkbox"/> Caldera	<input type="checkbox"/> EFI	<input type="checkbox"/> Other: _____

**Epson Cloud Solution PORT**

Was Epson Cloud Solution PORT set up and connected to this printer serial number?  Yes  No

Is the customer aware that Epson Cloud Solution PORT is required for User Replaceable Print Head Capability on these products?  Yes  No

\_\_\_\_\_

User name/E-Mail Address \_\_\_\_\_

\_\_\_\_\_

Organization ID \_\_\_\_\_

**For more information visit: <https://epson.com/EpsonCloudSolutionPORT>**

**Customer Installation Information (SELECT ONE)**

I confirm that the above described printer, including all hardware, accessories and software, was installed to my satisfaction and was functional at the time that the dealer or installer left my location.

I confirm that the above described printer, met the target print quality for my applications and of the sample provided by the technician in the print modes requested.

Yes  No - Was a preinstallation checklist completed prior to installation?

If any discrepancies between actual customer location and preinstallation checklist, please explain: \_\_\_\_\_

Confirmation does not affect in any way the terms and conditions of the standard Epson Limited Warranty, or, if purchased, the Extended Service agreement. Completing and signing this form only indicates the circumstances of installation.

Customer Signature \_\_\_\_\_

Date \_\_\_\_\_

**SureColor Purchase Terms**

By initialing below, I acknowledge the following purchase terms:

- These SureColor products use only genuine Epson-brand ink cartridges or packs. Other brands of ink cartridges and ink supplies are not compatible and, even if described as compatible, may not function properly or at all.
- The printer comes with a 90 day limited on-site warranty. Extended service plans may be purchased direct through Epson or through an authorized dealer. Additional warranty and service plan information can be found at [www.epson.com/support](http://www.epson.com/support).

Customer Initials: \_\_\_\_\_

**Epson Authorized Reseller/ Epson Installer Information**

Reseller Company Name \_\_\_\_\_

Installation Date \_\_\_\_\_

Installer Contact Name \_\_\_\_\_

Invoice Date \_\_\_\_\_

Installer Contact E-mail \_\_\_\_\_

Installer Contact Phone Number \_\_\_\_\_