

**Print Device Form**

This form must be completed for the purpose of accuracy of information and authorisation for payment.

New Install                       Move                       Remove                       Upgrade

Device #: \_\_\_\_\_ Serial #: \_\_\_\_\_ Model: \_\_\_\_\_

CAMPUS: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

CURRENT DEVICE INFORMATION	
Contact Name	
Phone Number	
Email Address	
Cost Centre	
Current Location Address	Rm# Building Address
Bldg Code	City                      Postcode
Date	Date                      Time
Site Access	Stairs                      Elevator
Port / Outlet	
Toner / Consumables Delivery Address	Rm# Building Address  City                      Postcode

NEW DEVICE INFORMATION	
Contact Name	
Phone Number	
Email Address	
Cost Centre	
New Location Address	Rm# Building Address
Bldg Code <b>D203</b>	City                      Postcode
Date	Date:                      Time
Site Access	Stairs                      Elevator
Port / Outlet	
Toner / Consumables Delivery Address	Rm# Building Address  City                      Postcode

COST OF RELOCATION: Please tick appropriate boxes below

- Building to Building - \$250 +GST
- Within Building - No charge
- Campus to Campus

All other non-standard relocation charges require a quote.

Special Instructions:

INSTALLATION REQUIRED All moves require a POrder for re-installation

- Yes - \$135 +GST

Purchase Order \_\_\_\_\_  
(made out to Canon NZ Ltd)



NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

TITLE / POSITION: \_\_\_\_\_

SIGNED: \_\_\_\_\_

DNS NAME: \_\_\_\_\_

IP ADDRESS: \_\_\_\_\_

MAC ADDRESS: \_\_\_\_\_

IT HUB: \_\_\_\_\_

ASK IT R#: \_\_\_\_\_

Please email completed form to [uniflow.uniprint@otago.ac.nz](mailto:uniflow.uniprint@otago.ac.nz)