

Rampage Remote Pre-site Checklist

Please fax this form to 781-891-7213 when proposing Rampage Remote. Must precede orders.

End-user:

Company name: _____ IT or MIS contact name: _____

Street: _____ City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____ Email: _____

Dealer:

Company name: _____ Key contact name: _____

Telephone: _____ Email: _____

ALL FIELDS REQUIRED.

Environment:

Is there a network drop for Rampage Remote? ___ yes ___ no

What operating system is the production server running? _____ Version? _____

What operating system(s) are Macintosh workstations running? _____
___ Mac OS 9 only
___ Mac OS 10 only
___ Mac OS 9 and OS 10

What type of Internet connection is being used? _____
___ T1
___ DSL, specify ___ SDSL or ___ ADSL
___ ISDN
___ Cable modem
___ Dial up

Connectivity:

Is Static IP being used? ___ yes ___ no

Is there a public Static IP address for Rampage Remote? ___ yes ___ no

Is there a firewall? ___ yes ___ no Is there onsite personnel who can configure a firewall? ___ yes ___ no

Is Port 80 open? ___ yes ___ no

Is there access to an SMTP Mail Server? ___ yes ___ no

Other:

Specify the number of operators, CSRs, and other staff who will be trained on Rampage Remote. _____

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