



SYSTEM INFORMATION

Date: _____

END USER

Contact Name: _____

Company Name (site): _____

Address: _____

Site Phone #: _____

INSTALLER

Technician Name: _____

Company Name: _____

Address: _____

Phone #: _____ Fax #: _____

E-Mail: _____

SYSTEM REQUIRING TECHNICAL SUPPORT

Software Key#: _____ # of Ports: _____

Software Version: _____ Phone System: _____

VoiceGate Product: VIP 4000 Lite Voice Wizard ICS/NT ICS Lite/NT
(Please Circle)

Problem: _____

TECNICAL SUPPORT RATES:

- 1) Per Incident Rate (A single call no longer than 20 minutes) \$75.00/incident
- 2) Hourly Rate (Each call is based on a 15 - minute minimum) \$150.00/incident
- 3) 6 Month Rate (10 hours max/1 to 40 calls, 15 minute minimum) \$750.00
- 4) Minimum Charge (in house 3 hours) \$85.00 / Hour
- 5) Minimum Charge (on site 3 hours) \$100.00 / Hour
- 6) Passcode Recovery (Incident rate & technician file time) \$160.00

Which rate would you like? _____

Please fax back to **416 747-2887**. A VoiceGate technician will contact you on site once your information has been processed.