![TreadWare logo]

SystemAX100-IT   **www.treadware.biz**

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CLIENT IT Evaluation Questionnaire	Date:	Code: (Treadware only)	
Company:			
Address:	City:	State:	Zip:
Primary Contact:	Position:	Email:	
IT/Technology Officer:	Phone:	Email:	

_____

This form is intended to gather accurate information that will assist the Treadware Systems Engineering department to properly assist in the equipment and systems requirements for the proper deployment of Treadware software equipment and systems. You may, from this date, be asked to update this file so that we can better provide tech support and related services. This information will be treated with confidentiality and will not be shared for any purpose. Please call with any questions you may have. Complete and email this form to the email address on the header of this form.

_____

1.   **Existing System**: Please describe as detailed as possible your current IT based system that is in place and operational:

a) Type Internet Service Provider (ISP):_____Cable _____Phone(DSL)_____Fiber_____

b) Modem/Router Brand: _____Wireless: Yes____ No_____ Ports _____Static IP Enabled: Yes___

c) Network Switch: Yes____ No: ____Port Count:____ Managed: Yes ____No___ Gigabit_____: Brand:_____

d) Number of Devices on Switch: Computers: ____ Printers: _____VOIP_____ Scanners_____ Other_____

e) Location of Switch: _____

f) Type IT Framework: Wired: Yes____ Wireless: Yes___ Bluetooth: Yes_____ Hotspots: Yes____ No____

2.   **Deployment**: Please list the locations of the TREADWARE hardware: If a floorplan is available please email. We can accept any type of drawing (CAD) or graphics file such as PDF.

a) Main ISP drop(modem/router provided by ISP)_____

b) Switch location: If several switches are in place then provide location where Treadware equipment connections would be centralized_____

c) Are your devices all directly wired to the switch (home-run): Yes____ No: ___Please describe the wired set up as best you can. If you have your system diagrammed please provide us with the diagram: we can accept any drawing graphics file: .dwg, .dxf, .vsd

d) Quantity of Treadware Stations: Work Stations: _____ Printers_____ Other_____

3.   **Embedded Systems**: Where Treadware software runs on existing network and equipment Please describe the system briefly:

4.   **VPN Setups**: Please described if you use a VPN for Treadware

5.   **FireWall Information:** Please describe if you have a firewall in place and how Treadware systems are integrated with your firewall.

6.   **SQL Backup-Data Transfer:** Please detail how Treadware data is archived and transferred to your business technology platforms.

7.   **IT Management**: Please provide information regarding your management of your IT systems.

a) Staff IT Manager: Yes: _____ Name: _____Phone_____ Email_____

b) Contractor IT: Yes:_____ Company_____ Phone_____ Email_____

Notes & Comments: Please use this area to provide any information that would be of value to Treadware so that we may provide proper tech support or assist you with your existing Treadware platform.

If you are a new client and installing the Treadware SystemAX100-IT package then please tell us how you plan to install the equipment once shipped. Please provide any contact information that would be helpful in the deployment process.

Information Provided by: _____ Position:_____ Phone:_____
Email:_____