TECHNICAL FORM

Part 1 – General Informations
1. Company Name :
2. Address :
3. Telephone (with extension) :
4. Fax :
5. E-mail :
6. Main Technical Contact :
7. Administrative Accounts Manager :

Business office: 460 Ste Catherine West, Suite 905
Montreal, H3B 1A7, QC, CA
Tel: +1 514 600 0155, Fax: +1 514 600 0152
E-mail: info@voxsun.com
Customer Service: 1877-9-VoxSun (869786)

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Part 2- Internet Connectivity

1. Internet Connection Type	⃝ DSL ⃝ Cable ⃝ Metro Ethernet ⃝ Fiber Optic

2. Internet Provider:	3. Internet Plan/Package Name:

3. Internet Package Advertised Speed	Download:
	Upload:

4. Actual Internet Speeds*		Test #1	Test #2	Test #3	Test #4
	Download:				
	Upload:				
5. Ping Results*	Packet Loss:				
	Ping:				
	Jitter:				

6. How many times did the internet go down during the last 30 days?

7. Are you satisfied with your internet speed?   ⃝ Yes   ⃝ No

8. How does your company use the internet connection?

⃝ Web surfing   ⃝ A lot of downloading   ⃝ A lot of uploading

⃝ Teleconference   ⃝ Video-conference(Skype)   ⃝ Document Management System

⃝ Other(Please specify)

*Make sure that you do these tests during your office hours and that you wait between an hour and two between each tests in the same category.

For the speed test, go to www.speedtest.net
For the ping test, go to www.pingtest.net

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Part 3 – Network

1. Who originally setup your network?

2. Is the network being actively maintained by a professional?　　○ Yes　　　○ No

3. Router(s)		Router #1	Router #2	Router #3
	Manufacturer:			
	Model Number:			

4. Switch(es) (if applicable)		Switch #1	Switch #2	Switch #3
	Manufacturer:			
	Model Number:			
	PoE Standard* (if applicable)			

5. Wi-fi Access Point (if applicable)		Access Point #1	Access Point #2	Access Point #3
	Manufacturer:			
	Model Number:			

6. Is your router remotely manageable?　　○ Yes　　　　　　○ No

*Power over Ethernet

Part 4 – Existing System

1. Do you have an existing phone system already at your location? ◯ Yes ◯ No

2. What type(s) of cellphone(s) do you have?	Quantity	Type(E.g. iPhone, Blackberry, Android, etc.)	Model

3. Is your system VoIP (Voice Over IP, telephone over the internet) or a traditional phone line system?	◯ VoIP ◯ Traditional Phone Line System

4. What company is the service through?	5. How many lines do you currently have?

6. How many extensions(phones) do you currently have?	7. How many people use the phone concurrently in your organization?

7. What problems are you experiencing with your current system?

8. What are the features that you like about your current system?

Part 5 – Usage

1. Do you have VoIP phones that you plan to use with VoxSun?	◯ Yes ◯ No
2. What brand and model will they be? (List all the models that you plan to use)	
3. How many fixed VoIP phones will you be using?	
4. Will your users be using the VoxSun iPhone app through wifi?	◯ Yes ◯ No
5. Will you be migrating the existing phone system to VoxSun? If so, please send us a list of all users and extensions.	
6. Do you want VoxSun to help you with setting up your IVR?	◯ Yes ◯ No

Part 6 – Installation

1. Do you want VoxSun to help you with the installation of the phone system?	◯ Yes ◯ No
2. Do you want to upgrade your current router and switch to VoxSun certified hardware?	◯ Yes ◯ No
3. Do additional cables or network drops need to be installed?	◯ Yes ◯ No

✓ **Once you have finished filling out the form, please send it to your accounts manager or by fax to 1 (877) 877-2231 or by email to info@voxsun.com**