

First, Last (Owner)

Signature



Date



MERCHANT SITE SURVEY (Retail)

Business Information

Business name (DBA) _____

Business address _____

Business telephone _____

Business type: SIC code, description of items, type of retail (clothing, convenience, other) _____

Operators? Yes No If YES, how many? Qty _____

Operator 1

First name _____ Last name _____

T: _____ E: _____

4-digit pass code _____ Role _____

Operator 2

First name _____ Last name _____

T: _____ E: _____

4-digit pass code _____ Role _____

Operator 3

First name _____ Last name _____

T: _____ E: _____

4-digit pass code _____ Role _____

Operator 4

First name _____ Last name _____

T: _____ E: _____

4-digit pass code _____ Role _____

Please note: if you have more than 4 operators, please provide required details on an attached sheet of paper.

Business Information continued...

Will they be using a barcode scanner?

 Yes No

If YES, can they provide all SKU/ITEMS with their barcodes, in an .xls or csv file?

 Yes No

Have you received the list?

 Yes No

How many registers or tablets in total?

Dejavoo devices (card readers/CC machines)?

Do they have any coupons or gift cards in circulation?

 Yes No

Have you received the list?

 Yes No

Do they currently have a POS system in place?

 Yes No

What is the POS company's name? _____

Do they have a WiFi router in place? Quality? Interferences?

 Yes No

Do they offer WiFi to their customers?

 Yes No

If YES, is the WiFi network separate from the POS (ie, guest WiFi network)?

 Yes No

Username _____ Password _____

How many printers will they need?

Receipt _____ Other _____

Do they currently have any hardware from previous POS systems?

 Yes No

Make _____ Model or Part # _____

Receipt _____ Label _____

Special notes _____

Do they have pre-existing Cat5e cabling?

 Yes No

If NO, what date will the cabling be done? _____

Number of power outlets needed? _____

Do they have the necessary number of outlets available?

 Yes No

Is there someone on staff that knows and is in charge of networking?

 Yes No

If NO, can they get one for day of install? _____

Is this a new business?

 Yes No

Planned "GO LIVE" date?

Date _____ / _____ / _____

Planned installation date (for equipment to be there)

Date _____ / _____ / _____