



ORDER FORM

1. NAME OF FIRM : _____

2. ADDRESS : _____
: _____
: _____
: _____
: CITY : _____ PIN : _____

3. OFFICE PHONE NOS. : _____ MOBILE : _____

4. OFFICE HOURS : _____

5. KEY/CONTACT PERSON : _____

6. DESIGNATION : _____

7. RESI. PHONE NOS. : _____

8. COMPUTER OPERATOR NAME : _____

9. E-MAIL ID : _____

10. SYSTEM'S CONFIGURATION :
 OPERATING SYSTEM : WIN SERVER WIN XP WIN 7 WIN 8
 PRINTER TYPE : DMP LASERJET INKJET

11. SOFTWARE ORDERED : _____

12. SOFTWARE DETAILS : _____

13. PAYMENT DETAILS : _____
: Bank _____ Branch _____

14. REMARKS : _____

15. **Terms & conditions:** (1) Upgrade fees will be payable in every year. (2) In case of soft code security Rs. 250/- will be charged for new security code for genuine cases. (3) We will not be responsible for any computer hardware related problems. (4) The policy matters may change as and when necessary without prior notice.

PLACE : _____

DATE : _____

SEAL & SIGNATURE OF CUSTOMER

FOR OFFICE USE

CLIENT CODE	USER ID	CD KEY	LICENSE KEY