Complete this form and fax to the CSR

PRINTER INFORMATION SHEET

PROVIDE THE FOLLOWING FOR EACH ADDRESSABLE PRINTER USING DCPS - *(Use one sheet for each Functional POC)*

LOCAL PRINTER MAKE & MODEL/PAPER SIZE:_____/_____

PRINTER ID: _____

PRINTER PORT: LPT1_____ LPT2_____

CONNECTIVITY: LAN: YES NO GATEWAY: YES NO HOST:_____

LOCATION: BLDG_____ ROOM_____

TECHNICAL POC:_____

PHONE: (DSN)_____ (COMM)_____ (FAX)_____

NETWORK PRINTER MAKE & MODEL/PAPER

SIZE:_____/_____

VTAM PRINTER ID: _____ *(If known)*

CONNECTIVITY: LAN: YES NO GATEWAY: YES NO HOST:_____

LOCATION: BLDG_____ ROOM_____

TECHNICAL POC:_____

PHONE: (DSN)_____ (COMM)_____ (FAX)_____

OTHER PRINTER MAKE & MODEL/PAPER

SIZE:_____/_____

PRINTER ID: _____

PRINTER PORT: LPT1_____ LPT2_____

CONNECTIVITY: LAN: YES NO GATEWAY: YES NO HOST:_____

LOCATION: BLDG_____ ROOM_____

TECHNICAL POC:_____

PHONE: (DSN)_____ (COMM)_____ (FAX)_____