

## Copier Move Request

Requested by: \_\_\_\_\_ Phone: \_\_\_\_\_ Date: \_\_\_\_\_

SCCOE ID#: \_\_\_\_\_ RMC Copier ID # \_\_\_\_\_ S/N \_\_\_\_\_

Charge to PO# \_\_\_\_\_ Date to arrive at new location: \_\_\_\_\_

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### Current Location Information

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Site Name \_\_\_\_\_

Address \_\_\_\_\_ Floor \_\_\_\_\_ Room \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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Primary Contact:\* \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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Alternate Contact:\* \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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### Network Information

Que Name \_\_\_\_\_

IP Address \_\_\_\_\_ Subnet Mask \_\_\_\_\_ Gateway \_\_\_\_\_

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### New Location Information

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Site Name \_\_\_\_\_

Address \_\_\_\_\_ Floor \_\_\_\_\_ Room \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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Primary Contact:\* \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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Alternate Contact:\* \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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### Network Information

Que Name \_\_\_\_\_

IP Address \_\_\_\_\_ Subnet Mask \_\_\_\_\_ Gateway \_\_\_\_\_

**\* Important Note:** All contacts must located at the site.