

Dealer Name: _____ Contact Name: _____
 Account Number: _____ Email: _____
 Phone Number: _____ Job Name or Reference: _____

Type of system required

Paging Only Paging with Background Music

System Configuration

1. If using a microphone to page, what type and how many are needed?
 Desktop Mic ____ Handheld (CB style) ____ Gooseneck Mic ____ Other ____
2. If using a telephone to page, what type of phone system is being used?
 Analog Single Line ____ Digital KSU ____ IP Onsite ____ IP Hosted ____
3. Do you require zone paging? Yes ____ (How many zones) ____ No ____
4. Do any areas (zones) require volume control, if yes, how many? Yes ____ No ____
5. What type of volume control? In-wall ____ Rack Mount ____
6. How many speakers will be used in each zone? ____
7. Type and quantity of speakers required.
 Indoor ____ Surface Mount ____ In-Wall ____ Drop Ceiling ____ Fixed Ceiling ____
 Outdoor ____ Paging Horn ____ Pendant ____ Rock ____ Other ____
8. Speaker quality required: Entry Level ____ Mid-Grade ____ Higher-End ____