Dual Band (2.4 GHz & 5 GHz)

Pre-Installation Configuration Form

Customer must fill out and return this form prior to product shipment, or prior to the installation.

Customer & Contact Information

	Organization Name:		Customer Number:		
	Shipping Address: (City, State, Zip)				
	Installation Address: (City, State, Zip)				
[ ] Onsite?	Contact: Name 1		Phone:	Email:	
[ ] Onsite?	Contact: Name 2		Phone:	Email:	

IT Contact

Do you have an IT Person or Network Administrator?					Yes ( ) No ( )
[ ] Onsite?	Contact: Name 1		Phone:	Email:	
[ ] Onsite?	Contact: Name 2		Phone:	Email:	
Will the administrator be present at the time of installation or onsite service?					Yes ( ) No ( )

Network Information

Please skip if you are self-configuring. Otherwise, **select one network type** and provide the requested information.

( )	WPA2 Enterprise (PEAP-MSCHAP)	( )	WPA/WPA2 Personal (AES or TKIP)	( )	Open Network
SSID:		SSID:		SSID:	
*UN:		PW:		Landing Page?	Yes ( ) No ( )
PW:					
Note: If WPA2 - Enterprise (PEAP-MSCHAP)" is selected, nodes will require TLS 1.0 on your local network		**Note**: no TLS required		**Note**: no TLS required	

* Include Domain Name

SensoScientific Network Requirements

Please select to confirm these network requirements can be met:

Are you using 2.4/5.0 GHz Wi-Fi (IEEE 802.11 b/g/n/a, 802.1x)	Yes ( ) No ( )
Is Port 443 open to outbound connections?	Yes ( ) No ( )
Does your network support DHCP?	Yes ( ) No ( )
Does your network use IPv4?	Yes ( ) No ( )
Are you able to access the links below through any internet browser? https://dbota.sensoiot.com/	Yes ( ) No ( )
Please confirm the assigned Wi-Fi network **does not** use a proxy?	Yes ( ) No ( )
Please confirm the assigned Wi-Fi network **does not** use MAC Authentication? *(If "No", provide IT contact to send MAC addresses)*	Yes ( ) No ( )
Customer Notes: 	

Completed By

Customer / IT Name: _____

Signature: _____

Department: _____

Date: _____

Once finished, please send to support@sensoscientific.com for processing.

V:5.2

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