

**US
EVALUATION PROGRAM REQUEST FORM & AGREEMENT**

Customer Information

Company name _____
 Address line 1 _____
 Address line 2 _____
 City Davis State _____ ZIP _____
 Contact name _____
 Title _____
 Phone _____ Fax _____
 E-mail address _____

Evaluation Information

Customer Use ___ **Territory Use** ___ **Quote**
 Yes ___ NoX ___
Standard delivery via GROUND
Budget center (if not ground) _____
2nd day ___ **Overnight** ___
Date needed: _____
NASG/XBS customer? Yes / NoX
 Sales Potential: _____ (12 month)
 First order timeframe: _____
 ___ASAP_____

Equipment requested:

Part Number	Quantity	Description	Serial Number

Conditions of Evaluation Loan Agreement:

The undersigned party acknowledges that the equipment listed above is the property of Xerox Corporation and is on loan for the specified evaluation period. Upon signature of this request, customer agrees to the following terms and conditions:

- Use of this equipment is for the sole purpose of evaluating suitability of product for customer's application requirements
- Equipment is not to be moved from location specified in shipping address without prior written consent of Xerox.
- Customer must take reasonable care of loaned equipment for duration of evaluation. Customer should not cause or permit any modifications to the equipment.
- In the event that said equipment is stolen, lost, damaged, or missing any part of its original packaging and contents, said party agrees to pay for the purchase of the loaned evaluation equipment.
- If equipment is not purchased, said equipment is to be returned to Xerox Corporation in original condition.
- In no event shall Xerox be liable to customer for any indirect, special, incidental, or consequential damages arising out of this loan. This document constitutes the entire Agreement between Xerox Corporation and said parties.

 Authorized customer signature Date Printed name
 Thomas E. Hyland

 Xerox Corporate Account Mgr signature Date

 Xerox Area Director signature Date

Please confer with Xerox Application Engineer to insure application & network environment are suitable for a successful evaluation.

E-Mail or Fax Requests to appropriate OBP Evaluation Coordinator:

United States and Canada:

Cindy Wignall

Phone: (503) 685-3041

Fax: (503) 582-6099

