

Intact Digital Ltd
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Send the signed form to Intact Digital Limited (IDL) at accounts@intact.digital

Software Installa	ation Request Form	IDL-SIN-2020	
Organization Account Number			
IDL Package Upload ID (if available)			
IDL Software Registration ID (if available)			
Software Information			
Software Name:			
Software Version:			
Software Vendor:			
Installation type:	Indicate: stand-alone software application or client-server configuration, unsupported software or contemporary software, etc.		
Operating system:	Please state the recommended/prefere	red operating system.	
Hardware requirements:	Indicate typical hardware requirements	3	
Licenses:	Please state the type and number of lie	censes and number of software users	
Party Responsible for Installation			
Client	Intact Digital	Other:	
Contact Details of the Third	d-Party Installer		
Company Name:			
Contact Name:			
Role:			
Email:			
Phone:			

## **Installation Information**

Installation Phases:			
Please describe any specific requirements, e.g., regulatory requirements, pre-defined installation procedure. Supply supporting documents or regulations as needed.			
Test Procedure			
Please describe any specific requirements, e.g., regulatory requirements, pre-defined procedure. Supply supporting documents or regulations as needed.			
List of Supporting Tools			
Screen capture	Documentation/PDF Reader		
Other:			
Hosting/Virtualization Platform  Please select one or more platforms for software virtualization			
Xen	VMWare		
Other:			
Installation Environments			
Virtual Machine	Other		
Availability for Installation			
Preferred Dates:			
Please indicate one or more preferred dates and times.			
Special Instructions:			
Please indicate any special instructions that need to be followed.			

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