

Xerox MFD setup Request Form

This form is to be used when a NEW MFD is to be installed OR an EXISTING MFD is being MOVED.
Can you also complete a Sitehelpdesk request and include the reference number below.
Please complete this form fully and pay particular attention to any red entries as failure to supply these details will delay the setup of your MFD.

Type of request (please tick)	New MFD <input type="checkbox"/>	Moved MFD <input type="checkbox"/>
Date of MFD setup		
Staff number requesting setup		
Project Code for recharge		
Sitehelpdesk Ref		
Xerox serial / asset number		X00
Current IP / New IP address	143.117.	143.117.
New Wallbox Label (Format: AAAAAA.B.CCC)		
Mac address eg. 9c:93:4e:4d:35:41		
Xerox model number eg.7845		
Device usage (staff or student)		
School		
Centre / Building		
Street address		
Postcode		
Floor & room numbers		
Primary contact full name		
Primary email address		
Primary telephone number		
Secondary contact full name		
Secondary email address		
Secondary telephone number		

Signed _____

Date _____

Please email this form to: mfdsetup@qub.ac.uk

completed