



Selecta Site Setup Form

What product(s) are you ordering? Select all that apply:	
<input type="checkbox"/> Kiosk	
Kiosk Serial Numbers:	
<input type="checkbox"/> Beacon <i>(the Beacon Site Set Up fee is waived when ordering a beacon and kiosk for 'Same Store' use on one order form)</i>	
Beacon Quantity:	
<input type="checkbox"/> PicoCooler	
PicoCooler Serial Numbers:	

Linking Instructions	
<input type="checkbox"/> Stand Alone	<i>One device at one location</i>
<input type="checkbox"/> Same Store (SS)	<i>To share inventory, users & naming</i>
	If the device(s) on this order need to be SS with an existing location
	Existing Device's Serial Number (VSH or KSK #):
	Existing Location Name:
<input type="checkbox"/> Connected Campus (CC)	<i>To share users only. Naming must differ from existing location</i>
	If the device(s) on this order need to be CC with an existing location
	Existing Device's Serial Number (VSH or KSK #):
	Existing Location Name:
<input type="checkbox"/> Replacement	<i>This device is replacing an existing device</i>
	Existing Device's Serial Number (VSH or KSK #):
	Existing Location Name:
<input type="checkbox"/> Relocation	<i>Moving a kiosk to a new location. All information will be wiped and the device will be restaged to a new location</i>
	Device Serial Number to be Relocated (VSH or KSK #):
	Original Location Name:
<i>Please complete Location Information below with NEW location details.</i>	

Standard Lead Time for all orders is 10 business days from the receipt of all deliverables
 Rush fees are applied when submitting an order to be completed prior to 10 business days
 See Linking Instructions for naming guidelines

Location Information	
Location Name:	
Location Address:	
Proposed Opening Date:	

Deliverables	
Tax System:	
Currency:	
Primary Language:	
Secondary Language:	
Time Zone:	
Custom Background Image	<i>If you need a custom background uploaded to your device, please attach it in a 1024 x 520px JPG file with your order</i>
Product Database:	
<input type="checkbox"/> New File	<i>Must attach a completed ADM Product Upload in original formatting with your order</i>
<input type="checkbox"/> Clone Existing Location	
	Existing Location Serial Number (VSH or KSK #):
	Existing Location Name:

Credit Card Information	
<input type="checkbox"/> Selecta Italy w/ Nayax	
	VPOS S/N:
	AMIT S/N:
<input type="checkbox"/> Selecta Televend	

Theme	
<input type="checkbox"/> FOODIE's	
<input type="checkbox"/> AJ to go	

Operator Information

Operator Company Name:	
Contact Name:	
Phone Number:	
Mobile Number (optional):	
Contact Email:	
Operator Billing Address:	
Primary ADM Admin Name (if different from Contact Name):	
Admin Phone Number:	
Admin Email:	

Other Notes

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