

Software Support Procedures

Remote Support for Event Data Inspection and Analysis

Software Name _____

Software version (Select Menu/Help/About to display your version) _____

Description for data inspection request.

(Describe all details. State what you saw, and also state what you expected to see, that has issued this request support)

Please provide a screenshot of the area of concern if possible
(press PRINTSCREEN KEY and paste in MS Paint)

Provide all contact information.

Name:

Phone Number:

Email Address:

Authorization signature for approval to access to remote system.

Company Name: _____

Print Name: _____

Print Title: _____

Authorized Signature. _____

Date: _____/_____/_____

I Authorize Divine Logic to: (Please Check One)

Access my network only to attempt to resolve the above listed issue

Access my network to attempt to resolve the above listed issue and any future request.

Charges will apply please see our website for current rates:

These terms and conditions are subject to change at any time in Divine Logic's sole discretion without prior written notice.

**THIS FORM MUST BE ON FILE BEFORE ANY REMOTE ACCESS WILL BE GRANTED
FAX (559)437-2777**