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| --- | --- | --- |
| **Customer Name** | **Contact details** | **Date:** |
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| **Job Details** |
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| **Requirements** | **Description** |
| Does you have existing data handling policy? |  |
| What is the preferred option for data wiping? | 1. Format
2. Kill Disk
3. HDD physical destruction
4. N/A
 |
| Do printers have HDD and are there any requirements for data wiping? |  |
| Did the customer reset/wipe all security passwords from the devices? | 1. To be wiped by customer
2. Provide P.W to Divers
3. N/A
 |
| Contact person at customer site when doing the pickup. | Required by Divers team |
| Equipment will be picked up by Divers | 1. Yes
2. No
3. Other…………………………………………………..
 |
| Does customer need a solid sided bin to be delivered to Site? | 1. Yes
2. No
3. Other…………………………………………………..
 |
| Are there any obstacles we must keep in mind for the pickup? | Lift / StairsParking………………………………. |
| Did the customer package the items based on their types or are they all mixed together? | To estimate time and cost by Divers |
| Does customer want Divers to remarket the audited equipment? | 1. Yes
2. No
3. Other…………………………………………………..
 |
| Does customer want wiping certificate to be provided for each storage device? | 1. Yes
2. No
3. Other…………………………………………………..
 |
| How old is the equipment? | 1. Less than 5 years
2. Less than 10 and more than 5 years
3. Other…………………………………………………..
 |
| Is it possible to get a percentage estimate of E-waste against sell value for the items to be audited? | 1. Yes
2. No
3. Other…………………………………………………..
 |
| Does customer expect a financial return, or do you want to have the cost neutral without a return? | 1. Yes
2. Cost neutral
3. Other…………………………………………………..
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| --- | --- |
| Will the customer agree to pay for the decommissioning costs in advance? | 1. Yes
2. No

 Other…………………………………………….………………. |
| Purchase Order required by client AP department  | 1. Yes

 No |
| Client billing address | 1. N/A

 orAddress: ………………………………………………………….…….………………………………………………………………………………..……………………………………………………………………………….. |

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| **Comments and special requests** |
| Ownership of the devices collected transfers to Divers Group upon collection thereof. The client confirms there is no outstanding monies owing on the items collected. |
| **Follow-up Actions**  |
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| --- | --- |
| Signature: |  |
| Date: |  |