Secured Devices – Work Order Technical Detail

VendorSafe TECHNOLOGIES
Protect Data. Secure Business.

Contact Information

Company Name/Location:

Name:

Title:

Phone:

Vendor Safe Secured Devices: (Complete this form only if Remote Access and/or LAN Scribe™ Workstation Logging are part of your selected services)

Provide the following information for each device at the location that will be protected by Vendor Safe Technologies and must be remotely accessed and/or will utilize the LAN Scribe Workstation Logging Service. Email to techsupport@vendorsafe.com.

Select Services: ☐ Remote Access ☐ LAN Scribe Workstation Logging

Device Type: ☐ Server ☐ Management ☐ DVR ☐ POS ☐ Other

IP Address: (Example: 192.168.1.2)

Select Services: ☐ Remote Access ☐ LAN Scribe Workstation Logging

Device Type: ☐ Server ☐ Management ☐ DVR ☐ POS ☐ Other

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