



# **GTI-PC System Support Application Form**

Company or Site Name						
Address						
County						
Postcode						
Country						
Authorised Site Represent	tative 1 (ASR)					
Telephone						
Mobile						
Email						
Authorised Site Representative 2 (ASR)						
Telephone						
Mobile						
Email						
Authorised Site Technician	1. (AST)					
Telephone						
Mobile						
Email						

# Notes:

- ASR 1. The person responsible for the day to day running of the irrigation system.
- **ASR 2.** The person responsible for decisions on upgrades and service agreements for the irrigation system.
- **AST.** Person or company (contractor) responsible for the technical upkeep of the irrigation system.

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**SF011** EX-DX-SA-011-1018-GB Page 1 of 2

## Your computer details

The GTI software version <sup>(a)</sup>	
The software release date <sup>(a)</sup>	
Windows version (a)	

#### Notes:

- (a) Select <Setup><Database><Check> from the main menu bar in the GTI software. Click the Check button and look out for the following 2 messages that are like the following examples:
  - Windows: 6.0.6002 (SP 2.0)
  - **Software version: 3.10 (Trident) (30-9-15).** In this case the system is Trident, the GTI software version is V3.10 and was released on 30 September 2015.

# **DOU Details**

	Serial nur	nber	Firmware version				
DOU 1 (b)							
DOU 2 <sup>(b)</sup>							
DOU 3 (b)							
	Model Trident / Gemini	Central / Expansion	Voltage	CSG / Zones			
DOU 1 (b)							
DOU 2 (b)							
DOU 3 <sup>(b)</sup>							

### Notes:

- (a) Select <Diagnostics><DOU Test> from the main menu. Select a DOU and click the Start test button. On completion of the test, lookout for the message Resident software:

  Version X.Y, where X and Y are each replaced with a single digit.
- (b) All DOUs in the system must be listed otherwise the agreement application is invalid.
- (c) The voltage can be found on the label attached to the right side of DOU cabinet

# **Additional Products Installed on site.**

DTMF Radio Interface		V.I.P		(	Communication Boosters			Remote Access		
Yes	No	Ye	S	No		Yes	No		Yes	No
					•					
Please tick one option		One	One year		s 🚨	☐ Five ye				
Please tick one agreement option		Gold	d		Silver					
Name:		Date:		Sig	Signature:					
Contractor Details. Insert contractor details below if different to your AST										
Company										
Main Contact										
Telephone										
Email										

**SF011** EX-DX-SA-011-1018-GB Page 2 of 2