SCAN & BULK SCAN ORDER FORM

DOCUMENT PRODUCTION Australia

CONTACT DETAILS

FIRM:	**INVOICE NO.:**
CONTACT NAME:	**OFFICE USE ONLY:**
CONTACT NUMBER:	**TODAY'S DATE:**
MATTER NO.:	**MATTER NAME/REF NO.:**
ADDRESS:	**EMAIL:**

ORDER DUE DATE		ORDER DUE TIME	

MATERIAL SUPPLIED (Please specify quantity for each type of material)

ARCHIVE BOXES	FOLDERS/BINDERS	BOUND DOCUMENTS	BUNDLES	DOCUMENTS	PLANS	OTHERS

SCANNING INSTRUCTIONS

GENERAL DOCUMENTS	ALL DOCUMENTS	TAGGED DOCUMENTS	TAGGED PAGES
	INDEXED	OTHER	
RESOLUTION	300 DPI	OTHER	
DELIMITING	SCAN SINGLE FILE	SCAN MULTIPLE FILES (AS PER CLIPS, STAPLES, DIVIDER)	OTHER
SCAN SIZE	AS ORIGINALS SIZE	A4	OTHER
COLOUR	BLACK & WHITE	AUTO COLOUR (EXACT DIGITAL COPY OF ORIGINALS)	
SCAN PLANS & MAPS	AS ORIGINALS	REDUCED TO A4	OTHER
REINSTATE ORIGINALS DOCUMENTS	AS ORIGINALS	NO	OTHER

SCANNING FORMAT

IMAGE FORMAT	MULTIPAGE PDF	OTHER
FILE NAME	SEQUENTIAL **(DEFAULT)** (00001,00002 ETC.)	OTHER
OPTICAL CHARACTER RECOGNITION (OCR)	YES	NO
BOOKMARKING	YES	NO
EXPORT OTHER FORMAT	NO	YES (SPECIFY)
RINGTAIL DIRECTORY STRUCTURE	YES	OTHER

SCAN ORDER FORM

PAGINATION

PAGINATION REQUIRED	NO	YES (SPECIFY THE BELOW)
PAGINATION PER VOLUME	YES	NO
PADDING REQUIRED (EX: 00#, 000#)	YES	NO
STARTING PAGE NO.	CONTINUOUS NUMBERING	DOC_ID (EX: ABC.001.005.0001)
PREFIX	**SUFFIX**	**OTHER**

PAGINATION POSITION

TOP RIGHT	TOP LEFT	TOP CENTRE	TOP LEFT & TOP RIGHT
BOTTOM RIGHT	BOTTOM LEFT	BOTTOM CENTRE	BOTTOM LEFT & BOTTOM RIGHT

DELIVERY METHOD (SCANNING ORDERS ONLY)

CD/DVD	USB	HARD DRIVE	OTHER

SPECIAL INSTRUCTIONS

DELIVERY:

PRINT NAME (DELIVERED BY)	DELIVERY NOTES

PRINT NAME (DELIVERED TO)	SIGNATURE	DATE & TIME