

# System Disclosure Form For Philips Equipment MR

For highest, most accurate trade-in value, please complete this entire form and supply a digital photo of the front and side of the system being traded-in. Also, if possible, please provide one readable photo of the system ID plate.

<b>CUSTOMER INFORMATION</b>		Date: 07/28/2014 (mm/dd/yy)
Account Manager : James Graugnard		Customer: Oghi IMaging
Specialist: Billy Kees		Address: 1341 S Service Rd I-49
Project Manager: Tim Wright		City: Grand Coteau State/Province: LA Country: USA
System Being Quoted: Ingenia 1.5T		Contact Name: David Rushing
VAMC / DOD / Other Government Sale: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Contact Telephone Number: 337-207-3031 Contact Fax Number:
If Government Sale, will hardrive be included with trade-in: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Likelihood of Order: <input checked="" type="checkbox"/> Investigation <input type="checkbox"/> 50% <input type="checkbox"/> >75% <input type="checkbox"/> Awarded		
<b>SYSTEM CONFIGURATION AND CONDITION</b>		
OEM: Philips	Year of Mfg: 2005	Site ID: 534301
System Model Name: Achieva	Serial Number: 20210	Is Trade-In on Lease: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Lease #:
Is System In Good Working Condition: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, Explain:		
Is System Currently in Use: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, Explain:		
Is System Complete: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, List missing items:		
Image Quality: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor		
Cosmetic Appearance: <input checked="" type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor		
Service: <input checked="" type="checkbox"/> OEM Full <input type="checkbox"/> OEM Time/Materials <input type="checkbox"/> 3 <sup>rd</sup> Party,		
Coils (List All): Brain 8ch , HNV coil , spine coil , Flex-m , Foot/ankle , Body wrap , wrist coil , Knee-8ch , C3 coil , 4ch Head coil		
Are all coils functional: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, Explain		
Gradient Level: Copley 271C master/slave		
Software Level: 1.8.1		
Workstation: <input checked="" type="checkbox"/> Yes, Model View Forum Level: <input type="checkbox"/> No	Chiller: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, not returning <input type="checkbox"/> No, not needed	
Laser Camera: <input type="checkbox"/> Yes, Model <input checked="" type="checkbox"/> No	Injector: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Additional Information / Options:		
<b>IF MOBILE, COMPLETE THIS SECTION</b>		
<input type="checkbox"/> Trailer, Mileage:	<input type="checkbox"/> Modular Building	
OEM:	Year of Mfg:	Length:
On Board Generator: <input type="checkbox"/> Yes, OEM: Size: <input type="checkbox"/> No		
A/C works: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Patient Lift works: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Overall Condition: <input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor		
Current Location:		
<b>DE-INSTALLATION INFORMATION</b>		
Estimated De-installation Date: (mm/dd/yy)	Location of the system: <input type="checkbox"/> Basement <input type="checkbox"/> Ground <input type="checkbox"/> Upper	
Best Method of Removal: <input type="checkbox"/> Doors <input checked="" type="checkbox"/> Wall Removal <input type="checkbox"/> Roof Hatch <input type="checkbox"/> Elevator		
Raised Dock Available: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Crane Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Rigging Costs: <input type="checkbox"/> Rigging costs not to exceed \$10,000 <input checked="" type="checkbox"/> Rigging costs expected to exceed \$10,000 <input type="checkbox"/> No rigging required		
<b>CUSTOMER ACKNOWLEDGEMENT AND SIGNATURE</b>		