

Epson Impact Printer 30 Day Hands-On Evaluation Program

Impact Printer Evaluation Agreement

HOW TO APPLY FOR A 30 DAY EPSON PRINTER EVALUATION WITH FREE OVERNIGHT SHIPPING

Fill in this form and fax it to (513) 719-3182. Please print clearly. All fields must be completed, including credit card information, in order to process your request. Missing or unreadable information will delay your order. Program questions? Call the Epson Evaluation Program Manager at (888) 437-3892 or e-mail EpsonProgram@adex-intl.com. Printer questions? Call (562) 290-4461

REQUESTOR INFORMATION All fields required:

Reseller End user System integrator Other

Date: _____

Name: _____ Phone / Ext.: _____

Company: _____ Fax: _____

Address: _____ City: _____

State: _____ Zip: _____ E-mail: _____

SHIP TO ADDRESS (If different than above):

Contact: _____ Phone / Ext.: _____

Company: _____ E-mail: _____

Address: _____ City: _____

State: _____ Zip: _____

Epson Printer Requested: Epson LX-350 Epson FX-890 Epson FX-2190 Epson LQ-590 Epson DFX-9000

Printer Application (check all that apply): Multipart forms Labels Reports Checks Other _____

Total Number of Units to be Purchased: _____

Purchase Timeframe: _____

Current Printer Make / Model: _____

Interface Type: _____

Emulation: _____

TERMS AND CONDITIONS

- Evaluation Period:** Evaluation period is thirty (30) working days, beginning the day Borrower receives the unit. Epson must receive the unit back no later than seven (7) calendar days after end of this period. This offer is valid in the U.S. only online at EpsonStore.com. FedEx Overnight Shipping offer applies only to FedEx Overnight delivery of Epson Impact Printer(s) shipped to addresses in the 48 contiguous United States as part of the Evaluation Program through 11:59PM PT, 5/30/14. Offer does not apply outside of the Evaluation Program. Epson may consider a one-time request for extension of the evaluation period, but reserves the right to deny the request at its sole discretion. Request must be made prior to the expiration of the original 30-day period.
- Limits on Participation:** Participation is limited to six (6) units per six (6) month period per Borrower. One unit limit per completed form.
- Participation Subject to Approval:** Each request is subject to Epson's approval. Approval may be denied for these reasons, among others: requested unit not available; sufficient credit not available on credit card, or card authorization not received; Borrower has already participated to the maximum extent allowed under Sec. 2 above.
- Charges for Late Return:** Borrower is subject to a non-refundable late charge of \$50 for each unit not timely returned under Sec. 1 above. Late charge is assessed if the printer is not in Epson possession within 37 days after the Borrower receives the unit.
- Charges for Loss or Damage:** Borrower is subject to a charge for units or accessories damaged or lost while in Borrower's control. Items will be considered lost if not returned within 45 calendar days from receipt by Borrower. Lost charge is in addition to late charge if assessed under Sec. 4 above. Repair charge is Epson's standard end-user repair charge. For a lost item (or one damaged beyond repair in Epson's judgment), the charge is (i) for a whole unit, the MSRP (manufacturer's suggested retail price), plus \$25 admin fee, and (ii) for accessories, MSRP plus \$25 admin fee. Epson may, in its discretion, credit back some of the lost item charge if the item is returned after the 45-day period.
- Title:** Title to units and accessories remains with Epson. Borrower may not sell, transfer or encumber any loaned items. Borrower may not make or permit any modifications or alterations to loaned items.
- No Warranty:** LOANED ITEMS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND, EITHER EXPRESSED OR IMPLIED.
- Limitation of Liability:** Epson is not liable for any indirect, special, incidental, or consequential damages, including lost profits or lost business, arising out of this Program.
- Program Change or Discontinuance.** Epson reserves the right to change or discontinue the Program without notice.

CREDIT CARD INFORMATION (required prior to printer shipment):

Card Type (Visa, M/C Amex, etc.): _____ Exp. Date: _____

Card Number: _____ Cardholder Name: _____

I authorize Epson to bill any and all program charges to this card

Authorized Signature: _____

Billing Address: _____

For Epson use only / Evaluation Product:

Epson impact printer serial number: _____