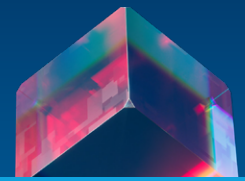# Key Digital® 4K AV over IP Systems Configuration Questionnaire

Please complete, sign and submit this form for approval to: sales@keydigital.com

Project Name _____

Project Address _____   Project Start Date _____

Company Info (Integrator)

Name _____   Contact _____

Address _____

City _____   State _____   Zip _____

Contact Phone _____   Contact Email _____

Network Equipment

Network Switches **MUST** be from Key Digital's Verified Network Switches list.

What network switch(es) are you using for AVoIP system set up? List Brand(s) and Model(s):

Brand _____   Model _____   ☐ New ☐ Existing

Brand _____   Model _____   ☐ New ☐ Existing

What WiFi router and Access Points are you using? List Brand(s) and Model(s):

Brand _____   Model _____   Qty _____   ☐ New ☐ Existing

Brand _____   Model _____   Qty _____   ☐ New ☐ Existing

What type of Network Cabling are you using:

Type (**must** be CAT6 min): _____   RJ45 Type _____

System Info

Does your system include a Video Wall?   ☐ No   ☐ Yes   If yes, please provide size and configuration. *Please provide drawing of desired Mosaic layout.

Video Wall 1 Name _____   Configuration (WxH)_____   ☐ Mosaic* _____

Video Wall 2 Name _____   Configuration (WxH)_____   ☐ Mosaic* _____

What control system are you using?

☐ Compass Control® Pro   ☐ KD-App (Routing ONLY)   ☐ KD-App (Source Display & Control)

☐ Third Party:_____   ☐ TCP/IP   ☐ RS-232   ☐ IR

*Certified Reseller MUST hire Compass Control® Pro Certified Programmer or program the system at their own liability.

Compass Control® Pro Certified Programmer (view listing)

Company Name _____   Contact _____

Address _____

Phone _____   Email _____

Remote reconfiguration of your system's encoders, decoders, and verified network switch may be purchased for a $300 per day fee.

Configurations for each ENCODER (source) unit ☐ Use this subnet: _____ and choose IP addresses for me.

Do **NOT** use the following reserved IP addresses: **192.168.1.1**, **192.168.1.50**, **192.168.1.90**, **192.168.1.100**, **192.168.1.150**, **192.168.1.200**

Device Name	Group ID	Main IP Address	Video IP Address	Brand (If using KD-App Source Control)
	1			
	2			
	3			
	4			
	5			
	6			
	7			
	8			
	9			
	10			
	11			
	12			
	13			
	14			
	15			
	16			
	17			
	18			
	19			
	20			
	21			
	22			
	23			
	24			

Configurations for each DECODER (display) unit

Do **NOT** use the following reserved IP addresses: 192.168.1.1, 192.168.1.50, 192.168.1.90, 192.168.1.100, 192.168.1.150, 192.168.1.200

Device Name	Group ID	Main IP Address	Video IP Address	Included in video wall?	Brand (If using KD-App Display Control)
	1				
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
	10				
	11				
	12				
	13				
	14				
	15				
	16				
	17				
	18				
	19				
	20				
	21				
	22				
	23				
	24				

Key Digital® 4K AV over IP Systems Configuration Questionnaire

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Remote reconfiguration of your system's encoders, decoders, and verified network switch may be purchased for a $300 per day fee.

By signing below I acknowledge and I agree to all terms and conditions below:

» **You understand and agree that Key Digital is <u>NOT</u> in the business of installation equipment at job sites.** Key Digital is a manufacturer of the equipment, all installation responsibilities fall under Certified Key Digital resellers.

» KD-App source & display control uses a popular IR code set for each brand. Compatibility is not guaranteed and commands are not editable.

» Key Digital is <u>NOT</u> responsible for any and all installation troubleshooting you may require at the job site. Furthermore, you agree to stage all equipment at your place of business, test all equipment (hardware & software) prior to your installation at any jobsite.

» If completed Configuration Questionnaire is not received within three weeks of purchase order entry, the system will be configured and shipped with 192.168.1.xxx IP scheme.

Encoder & Decoder configuration sheets on pages 2 & 3 <u>MUST</u> be completed. Failure to complete all required fields or to sign renders this form <u>incomplete</u>.

Name _____   Title _____

Signature _____   Date _____