

Request of Customization

<i>Company:</i>	
Company Name:	
Street Address:	
City/State/Zip Code	
Country:	
Phone Number:	
Fax:	
Employee Number:	
<i>Contact:</i>	
Name:	
Phone number:	
Email Address:	
<i>Customization Available Date*:</i>	
<i>Request short description**:</i>	
Signature:	Date:

Note:

* This is the date you would like your customized software package to be available.

** Please feel free to attach the detailed request requirement file with this form.

*** Please send this form and other files to sales@northstarontario.com or fax them to 1-801-788-6497.