



Steltronic

**SCORING INSTALLATION
CHECKLIST AND SIGN OFF SHEET**

Job Name:

Date: _____

Contact Telephone: _____

of Lanes: _____

Owner/Responsible Party: _____

Installation Team Led By: _____

Installation Start/Finish Dates: _____

Warranty Start/End Dates: _____

Pinsetter Type: _____

Other Equipment Installed At Same Time: _____

Comments On Center Or Other Equipment: _____

2nd Ball Lights Working?: Identify which lane # did not work upon arrival: _____

Foul Lights Not working?: Identify the lanes that do not work properly: _____

Pinsetters turned on?: Identify the lanes which will not turn on: _____

Ball Rack Reset Buttons: Identify the lanes which will not cycle from the ball rack: _____

Electrical System

Met / Failed To Meet Steltronic Requirements: _____

Lightning Arrestors Installed: _____

Dedicated Isolated Ground Installed: _____

UPS Installed on the Server: _____

Comments On Electrical System: _____

Training

Training Done By: _____

Training Dates: _____

Name/Position

Persons Trained By Topic: **Front Desk** _____

On-Lane Equipment _____

Troubleshooting _____

Maintenance _____

Equipment Report By Lane

	Installed Yes/No	Status OK/Not OK	Missing Items
On-Lane Equipment			
Overhead Monitors:	_____	_____	_____
Joystick Lower Consoles:	_____	_____	_____
Lower Monitors:	_____	_____	_____
Cameras:	_____	_____	_____
Lane Computers:	_____	_____	_____
Shoe Vision:	_____	_____	_____
Cables:	_____	_____	_____
Hardware:	_____	_____	_____
Video Hardware:	_____	_____	_____
Wireless Intercom:	_____	_____	_____
Wireless Bowler Consoles:	_____	_____	_____
Other:	_____	_____	_____

Overhead Certificate: Signed By Structural Engineer _____ Released By Owner _____

Comments About On-Lane Equipment: _____

Network Terminals and Software

Scoring Software Version Installed: _____

System Passwords: _____

Modem Phone Number: _____

PC AnyWhere Access Password: _____

Other Software Installed: _____

	Installed Yes/No	Status OK/Not OK	Missing Items
Front Desk:			
Cash Drawer	_____	_____	_____
CRT or LCD Display	_____	_____	_____
Card Reader	_____	_____	_____
Magnetic Cards	_____	_____	_____
Back Office:			
Bar/Food Service Terminal:	_____	_____	_____
Pro-Shop Terminal:	_____	_____	_____
Other Terminal 1:	_____	_____	_____
Other Terminal 2:	_____	_____	_____
Other Terminal 3:	_____	_____	_____
Photostrike:			
VCR:	_____	_____	_____
	_____	_____	_____

Comments About Network Terminals and Software: _____

Other

Spare Parts Kit: Lane Computer ___ Pinsetter Interface ___ Camera ___ Joystick Interface ___
Other: (Itemize) _____

Start Up Kit VCR ___ Report Paper ___ Receipt Paper ___ Floppy Disks ___ Tools ___
Other: (Itemize) _____

The undersigned parties confirm that they have reviewed this form and that to the best of their knowledge, this form represents the present state of this center's WinVision Automatic Scoring Equipment.

Signed _____

Signed _____

Owner/Responsible Party

**Installer
For Steltronic, Inc**

Date: _____

Date: _____