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| **General Information For Test (GIFT)** |  |

**Customer details:**

|  |  |  |
| --- | --- | --- |
| Company: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
| Address: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
|  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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|  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
|  |  | Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
|  |  |  |
| Telephone: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
|  |  |  |
| Fax: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
| Email: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
| Contact Name: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**The information requested above and on the next sheet is required to ensure that the data included in the final test report is correct.**

**Should you require any assistance please do not hesitate to contact the Telecoms group.**

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**Tel:** +44 (0)1482 801801 **Fax:** +44 (0)1482 801806

**Email:** [info.hull@element.com](mailto:info.hull@element.com)

**Web:** [www.element.com](http://www.element.com)

**Section 1: Product Details**

|  |  |  |
| --- | --- | --- |
| Equipment name: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Type of Equipment |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Model: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
| Software location: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |
| Software version: |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |  |

**Section 2: Basic Technical Information**

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| --- | --- | --- | --- |
| **2.1** | Modes of operation |  |  |
|  |  |  |  |
|  | Handset (Connenction to the PSTN) | Yes | No |
|  | If so does the TE have :  🞎 Receive volume control 🞎 Powerfail  Please tick as appropriate |  |  |
|  |  |  |  |
|  | Headset (Conenction to the PSTN) | Yes | No |
|  |  |  |  |
|  | Mic Ports (Electrical connection to the PSTN) | Yes | No |
|  |  |  |  |
|  | DTMF dialling | Yes | No |
|  |  |  |  |
|  | Modem transmission (Please select as appropriate)  Maximum modem rate = 🞎 V.92 🞎 V.90 🞎 other  Please specify if other ( ) | Yes | No |
|  |  |  |  |
|  | Detect ringing | Yes | No |
|  |  |  |  |
|  | Detect network tones (ie Dial tone, busy tone etc) | Yes | No |

Any additional test modes / information required will be requested by the test engineer prior to the commencement of the testing.