



CANON SOLUTIONS AMERICA

Canon Solutions America, Inc. ("CSA")

One Canon Park, Melville, NY 11747

(800) 613-2228

## Agreement for Products and Services

## Exhibit B Order Form - Lease

Customer: Littleton Colorado City of

CFS App#

Page of

Salesperson:

Order date:

Billing Information		Lease Information		Equipment Maintenance Information	
Company:		Lease Term	Payment * (*Plus Applicable Taxes)		Select One option: <input type="checkbox"/> Included, unless excluded below
BDA:		Months	Base	Service	<input type="checkbox"/> Declined <input type="checkbox"/> Under separate agreement
Address:		Payment Frequency	Total		Consumables Included
City:		<input type="checkbox"/> Monthly	Due at Signing		Per Image Charge Billing Cycle
State:		<input type="checkbox"/> Quarterly	Number of Payments in Advance Total Due at Signing		<input type="checkbox"/> Toner (excludes clear) <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly
Zip:		End of Lease Term Purchase Option*			<input type="checkbox"/> Other
Phone#:		<input type="checkbox"/> Fair Market Value <input type="checkbox"/> \$1.00 <input type="checkbox"/> Other (estimated)			Coverage Plan
Fax#:					Price Plan
E-Mail:					<input type="checkbox"/> Per Unit <input type="checkbox"/> Fleet
					<input type="checkbox"/> Aggregate R Fixed
Item Code	Listed Items Description	Qty	Serial #	Ship to Information	
				Delivery Contact:	
				Delivery Address	
				Phone #	
				Email Address	
				Meter Read Contact:	
				Email Address	
				Phone # Delivery Date:	
				Elevator: <input type="checkbox"/> Yes <input type="checkbox"/> No Loading dock: <input type="checkbox"/> Yes <input type="checkbox"/> No	
				# of steps Hrs of Operation:	
				Special Instructions:	
				Delivery Contact:	
				Delivery Address	
				Phone #	
				Email Address	
				Meter Read Contact:	
				Email Address	
				Phone # Delivery Date:	
				Elevator: <input type="checkbox"/> Yes <input type="checkbox"/> No Loading dock: <input type="checkbox"/> Yes <input type="checkbox"/> No	
				# of steps Hrs of Operation:	
				Special Instructions:	
				Delivery Contact:	
				Delivery Address	
				Phone #	
				Email Address	
				Meter Read Contact:	
				Email Address	
				Phone # Delivery Date:	
				Elevator: <input type="checkbox"/> Yes <input type="checkbox"/> No Loading dock: <input type="checkbox"/> Yes <input type="checkbox"/> No	
				# of steps Hrs of Operation:	
				Special Instructions:	
				Delivery Contact:	
				Delivery Address	
				Phone #	
				Email Address	
				Meter Read Contact:	
				Email Address	
				Phone # Delivery Date:	
				Elevator: <input type="checkbox"/> Yes <input type="checkbox"/> No Loading dock: <input type="checkbox"/> Yes <input type="checkbox"/> No	
				# of steps Hrs of Operation:	
				Special Instructions:	
Key to Meter Read Method:				imageWARE Remote Unless noted above W = eManage website	
Total Maintenance Charge				*CSA Billed Only	

THIS EXHIBIT B ORDER FORM - LEASE ("Order Form") is entered into pursuant to, and incorporates all of the terms of, the Agreement for Products and Services referred to above (the "Agreement"). This Order Form constitutes a lease of the Listed Items described above. THIS ORDER FORM IS BINDING ON CUSTOMER UPON SIGNING BY CUSTOMER, AND IS BINDING ON CSA AND LESSOR AS PROVIDED IN THE AGREEMENT. THIS ORDER FORM IS NON-CANCELABLE BY CUSTOMER. CUSTOMER REPRESENTS THAT ALL ACTION REQUIRED TO AUTHORIZE THE EXECUTION OF THIS ORDER FORM ON BEHALF OF CUSTOMER HAS BEEN TAKEN BY YOUR SIGNATURE BELOW. YOU AGREE TO LEASE THE LISTED ITEMS DESCRIBED ABOVE AND, IF SELECTED ABOVE, TO PURCHASE THE MAINTENANCE SERVICES DESCRIBED ABOVE AND IN THE AGREEMENT. YOU ACKNOWLEDGE RECEIPT OF A COPY OF THIS ORDER FORM.

Customer Authorized Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

ACCEPTANCE CERTIFICATE

To: CSA and Lessor: Customer certifies that (a) the Listed Items referred to in this Order Form have been received, (b) installation has been completed, (c) the Listed Items have been examined by Customer and are in good operating order and condition and are, in all respects, satisfactory to the Customer, and (d) the Listed Items are irrevocably accepted by the Customer for all purposes under the Agreement. Accordingly, Customer hereby authorizes billing under this Order Form.

Authorized Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

For Internal Purposes Only:

CFS Authorized Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

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