

Title: INSTALLATION FORM		cassini CONNECT O.R.
Doc. RF 07.07.02	Version: V02	Effective Date: 08-Dec-2025

Account Information			
Account Name			
Address			
Contact Person			
Contact Number		Email	

Partner & ASC Information			
Partner Name	<input type="checkbox"/> CATALYS	<input type="checkbox"/> ENSAR	<input type="checkbox"/> Other
Encryption Key (Last 4 Digits)		Identification No	
ASC Name			

Cassini Installation Information			
Serial No		SW Version	
		Firmware	

Computer Information					
Serial No		Win Version		Win Build	
Antivirus available		Copilot disabled		UUID	
*Network connection authorized by customer IT					

Calibration Information							
LAC Performed		LAC Date		LAC Radius		Performed By	

Installed Licenses							
<input type="checkbox"/> Base	<input type="checkbox"/> SMART	<input type="checkbox"/> Beyeonics	<input type="checkbox"/> Catalys CT/TCA	<input type="checkbox"/> Color LED Grid	<input type="checkbox"/> DICOM	<input type="checkbox"/> EOP	<input type="checkbox"/> OSV
<input type="checkbox"/> Pupil	<input type="checkbox"/> Delta K	<input type="checkbox"/> Temp Report	<input type="checkbox"/> Streamline CT/TCA	<input type="checkbox"/> Guidance	Others		
Base License Expiry Date				Other License expiry Date			

Guidance Installation Information			
Serial No		SW Version	
		Control Monitor SN	

	Cassini	Guidance
	<input type="checkbox"/> Commercial <input type="checkbox"/> Loaner <input type="checkbox"/> Demo	<input type="checkbox"/> Commercial <input type="checkbox"/> Loaner <input type="checkbox"/> Demo
Demo Start Date		
Demo End Date		
Warranty Start Date		
Warranty End Date		

Accessories to Microscope			
Camera			
Splitter		<input type="checkbox"/> Original	<input type="checkbox"/> Leica
Camera adaptor		<input type="checkbox"/> F65	<input type="checkbox"/> F50

Installation & Training Information			
Installation Completed by		Date	
Application Trained by		Date	
Clinical Trained by		Date	

GDPR Consent
I have read and understood the attached GDPR Consent form.
<input type="checkbox"/> Yes, please go ahead and invoice my Cassini Care; Software, Service and Maintenance contract 30 days prior to the agreed expiration date.
<input type="checkbox"/> Yes <input type="checkbox"/> No: Cassini Technologies BV can send me occasional information about special sales offers, product upgrades and can use anonymized patient data for research and product improvement purposes

Signature Customer: _____ Signature Cassin Rep: _____