

# NICE Network, Inc.

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Contact \_\_\_\_\_ Date \_\_\_\_\_

Company \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ Ph# (\_\_\_\_) \_\_\_\_\_ Ext. \_\_\_\_\_

City/ST/Zip \_\_\_\_\_ Fax (\_\_\_\_) \_\_\_\_\_

### Hardware Information:

Hard Drive Manufacturer \_\_\_\_\_ Model \_\_\_\_\_ FW Version \_\_\_\_\_

### Operating System:

Windows XP/Vista 32bit () Windows XP/Vista 64bit () Windows Server 2000/2003 32bit ()

Windows Server 2000/2003 64bit () Mac OS/X () Mac OS/9 () Linux/UNIX () Other ()

### File System:

NTFS () FAT16/32 () HFS/HFS+ () UFS () Other ()

### RAID Failures:

Make/Model of RAID Controller Card \_\_\_\_\_

RAID Level \_\_\_\_\_ Number of Drives \_\_\_\_\_ Names of Partitions \_\_\_\_\_

### Most important files/directories (name and approximate size):

\_\_\_\_\_  
\_\_\_\_\_

Any pertinent details surrounding failure (i.e. any noises/symptoms being experienced, any intrusive actions completed to the drives, etc.): \_\_\_\_\_  
\_\_\_\_\_

Customer requests that NICE Network, Inc. inspect and identify problems with respect to customer's mass storage media and to remedy any problems found and retrieve customer's data. Customer will hold NICE Network, Inc. harmless for any damages whatsoever, including without limitation damages for loss of data, loss of business profits, business interruption, or other pecuniary loss, incidental, consequential, or indirect damages arising from this agreement. NICE Network, Inc. will hold all customer data in complete confidentiality and will sign customer's own nondisclosure agreement or any other compliance agreement required. NICE Network, Inc. will retain recovered data for 30 days after job completion. Any recovery issues must be addressed within this time frame. The client represents that they are the licensed user and/or rightful owner/user of any software and/or data being recovered by NICE Network and the client agrees to hold NICE Network harmless to any claims arising from unauthorized use of software and/or data being recovered for client. Customer agrees to pay NICE Network's attached invoice regardless of any associated insurance claims or coverage.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Company \_\_\_\_\_ Title \_\_\_\_\_