

Installation Checklist

Installation
Done.
KONO-60470

Customer Details

Company: Belanti Ristorante
Address: Heerskasse 169, 60488 Frankfurt am Main
Owner name: _____ Installation date: 29/4/2024
Telephone no: 069 76753405 Installation time: 15:00
AnyDesk ID: 1386258966 Installation by: Rajwamt Singh

Software version :

☒ Restaurant ☐ Server ☐ Einzel ☐ Other

Hardware Components

☐ POS model ☐ J500 ☒ J510 ☐ J580 ☐ J670 ☐ Other

Name	Qty	Name	Qty
<input type="checkbox"/> Customer display	<input type="checkbox"/>	<input type="checkbox"/> EC Machine	<input type="checkbox"/>
<input type="checkbox"/> Kellner Sly (Dalla)	<input type="checkbox"/>	<input type="checkbox"/> Paper roll	<input checked="" type="checkbox"/>
<input type="checkbox"/> Cash Drawer	<input type="checkbox"/>	<input type="checkbox"/> Label printer	<input type="checkbox"/>
<input type="checkbox"/> Reciept printer	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> Shrank anlage	<input type="checkbox"/>
<input type="checkbox"/> Weighing maschine	<input type="checkbox"/>	<input type="checkbox"/> Audio speaker	<input type="checkbox"/>
<input type="checkbox"/> LAN Cable	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> TSE	<input type="checkbox"/> 1 yr <input checked="" type="checkbox"/> 5 yr
<input type="checkbox"/> Fritz Box	<input type="checkbox"/>	<input type="checkbox"/> Wifi/USB	<input type="checkbox"/>
<input type="checkbox"/> Server/Switch	<input type="checkbox"/>	<input type="checkbox"/> Menu Card	<input checked="" type="checkbox"/>
<input type="checkbox"/> Waiter tablet -2	<input type="checkbox"/>	<input type="checkbox"/> Space Pole (optn)	<input type="checkbox"/>
<input type="checkbox"/> Barcode Scanner	<input type="checkbox"/>	<input type="checkbox"/> Foodbee (optn)	<input type="checkbox"/>
<input type="checkbox"/> Misc	<input type="checkbox"/>	<input type="checkbox"/> Misc	<input type="checkbox"/>

Quote _____ Remarks _____ Follow-up ☐

Final Price 4.165,00 Date 29/4/2024

Payment Adv _____ Bar _____ Online _____ Monthly _____

Submitted by _____ Reviewed by _____ Approved by _____