



Orca Dynamics Ltd.

2647 Turner St.
Victoria, BC V8T 4T8
PH: 250.595.8504 FX: 250 595-8564

ScreenConnect remote access authorization form

(Print name of business owner or CEO)

(Print e-mail address)

I _____ authorize _____

e-mail account to have unrestricted access to all Orca Dynamics supported POS terminals at:

Business name: _____

Address: _____

1. In the event remote access via this e-mail account is no longer required, written notification to terminate access is necessary. Access to the listed above location will be terminated within one business day. Administration fees may be applied for emergency termination and support.
2. Orca Dynamics reserves the right to terminate any user accounts from the Orca Dynamics ScreenConnect account for any reason.
3. ScreenConnect is at this time provided as a free subscription service for customers under service contract however it is understood that the terms and conditions may change at any time. Orca Dynamics will notify prior to billing in the event of any changes that may occur within the ScreenConnect service.
4. ScreenConnect is provided as a free service however support and service calls associated to ScreenConnect may be invoiced at current labour rates. ScreenConnect service and support is not covered under any service contracts or warranties unless otherwise mentioned.
5. Administration fees may apply to add any additional computers/terminals not provided or supported by Orca Dynamics.
6. Orca Dynamics is not responsible for any sabotage, data loss, and account monitoring with the above authorized account.
7. It is understood that the primary function of the existing ScreenConnect service is a support tool for Orca Dynamics to help facilitate problem resolution, reduce possible labour charges, and to reduce system recovery times. Removal of the ScreenConnect service may result in increased support fees and down times.
8. We agree to pay a one-time administration fee of \$45.00 to invite and add the above e-mail address to the Orca Dynamics Logmein system.
9. Please note that user logins with lost passwords or where the account has become locked out will be dealt with during business hours only. A request to recover account logins outside of regular hours will be subject to overtime support charges.

My signature below acknowledges the above information

(Signature)

(Date)

(Printed name)

(Title)

This form must be signed by the business Owner, President, or the Chief Executive Officer and faxed to (250) 595-8564. Any application sent by business employee's will be rejected.