

Spaceman USA Pre-installation Checklist

In order to ensure your satisfaction, we'd like to verify important details of your purchase and confirm accurate expectations. Please take your time to review each item below, fill out where necessary, and **initial** to the left of each number to accept.

_____ **1. Operator Contact**

Person responsible for operating, cleaning, and maintaining the Spaceman machine at the machine's location.

Name: _____ Store Phone: _____
Cell Phone: _____ Email: _____

_____ **2. Delivery**

Is a liftgate required: _____ Is an appointment needed: _____
Special delivery instructions: _____
Name and cell phone for delivery contact: _____

_____ **3. The Spaceman Warranty [found here](#)** has been reviewed and accepted

_____ **4. The machine will have proper **clearance**** according the machines specifications
Note: The machine will not operate correctly, and damage may occur if machine is not placed with adequate clearance.

_____ **5. Electrical requirements [found here](#)** have been reviewed and accepted and the correct electrical receptacle is in place where machine will be used.

_____ **6. I have reviewed **dispensing capacity**** and the size guide for my model and agree to and accept machines **maximum output** per minute and hour. Soft Serve [found here](#). Frozen Beverage [found here](#)
Model Number: _____
Maximum recommended serving size: _____

_____ **7. I understand that my Spaceman machine should not be run prior to completing a training.** Trainings can be scheduled on the home page of the spacemanusa.com website and operational training materials are [found here](#)

Name: _____ Signature: _____ Date: _____