







## **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, cleathe machine's location.	aning, and maintaining the Spacema	n machine at
	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 <b>Spaceman Warranty found here</b> has been reviewed and accepted		
<b></b> 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.		
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5.			
	electrical receptacle is in place wher	e machine will be used.	
6.	I have reviewed dispensing capacity and the size guide for my model and agree to and		
	accept machines <b>maximum output</b> per minute and hour. Soft Serve <u>found here</u> . Frozen		
	Beverage <u>found here</u>		
	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		
Novec	Signat		Data
Name:	Signat	ui C.	Date:

