



Excalibur Technology Corp.

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VOIP READINESS QUESTIONNAIRE

Thank you for your interest in VOIP Technology. This exciting product will bring a new level of service to your telecommunication needs, help reduce your costs and increase your productivity. Please answer as many questions as you can so we can best provide a quote to your company.

Company Name: _____

Contact Name: _____ Phone Number: _____

How many phone lines do you currently have? _____

Who provides your local phone service? _____

What is your average monthly local phone bill? _____

Who provides your long distance? _____

What is your average monthly long distance phone bill? _____

How many incoming phone lines do you have? _____

How many fax lines do you have? _____

Approximately what percentage of your calls are:

Local _____% Long Distance _____% International _____%

How many telephone handsets does your company use? _____**

Of those handsets, what type of access do each of those users need? Total should equal the number in your answer above. Pick a plan for each of those phones users and enter below.

Dial Tone Only – No service included. Pay for any calls made. _____

Unlimited Local – All local calls included within your LATA. _____

Unlimited Long Distance – Local, Nationwide and 22 countries. _____

Total: _____**



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What type of Internet Connection do you have? _____

Who provides this connection? _____ Expiration: _____

Do you have additional offices that will tie into this VOIP service? _____
(If so, please attach their addresses on a separate sheet.)

How many phones would you like for telecommuter use? _____
(These will be tied into the system and allow users to answer their phones from home.)

Do you use an auto attendant to answer the phones? _____

How many call queues do you need that hold callers for the next available operator? _____

How many existing phone numbers would you like to transfer to the VOIP service? _____

How many 800 numbers would you like to transfer to the VOIP service? _____

How many hunt groups (rings several phones at once) do you need? _____

What is the maximum amount of simultaneous calls you want to have? _____

Please list any additional questions or comments here:

THANK YOU for your time! Please fax this form back to our office at 847-842-0190.
Our staff will create a customized VOIP plan for you and get back to you shortly!