**Printer and Scanner Request Form**

This form is used to request the purchase of printer(s) / scanner(s). The form must be completed (Block Capitals) by the requesting user and budget holder and uploaded onto Ivanti. Please do not request Laptops/Desktops/Docking Stations/Monitors using this form, instead email [ToDevicerequests@hse.ie](mailto:ToDevicerequests@hse.ie).

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Requestor Details** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **First Name:** | | |  | | | | | | | **Last Name:** | |  | | | | | | | | | **Personnel No:** | | |  | |
| **Grade / Job Title:** | | |  | | | | | | | **E-Mail Address:** | |  | | | | | | | | | **Phone Number:** | | |  | |
| **Department:** | | |  | | | | | | | **Full Address (Incl. Eircode)** | | | | | | | | |  | | | | | | |
| **Logon User Name:** | | |  | | | | | | |
| **Alternative Contact** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: | |  | | | | | | | | **Phone Number:** | | | | |  | | | | | | **E-Mail Address:** | | |  | |
| **Reason / Business Purpose** | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Equipment Required** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Asset Tag of Computer Requiring IT Equipment:** | | | | | | | | |  | | | | | | **Network Point Number:** | | | | | | |  | | | |
| **Mono Printer:** | | **Qty:** | | |  | | | **Standard Model** | | | | | | | | | **High Volume Model** | | | | | | | | |
| **Colour Printer** | | **Qty:** | | |  | | | **Standard Model** | | | | | | | | | **High Volume Model** | | | | | | | | |
| **Scanner:** | | **Qty:** | | |  | | | **Low Volume** | | | | | | **Medium Volume** | | | | | | | | | **High Volume** | | |
| **Printer / Scanner Combo:** | | **Qty:** | | |  | | | **Low Volume** | | | | | | **Medium Volume** | | | | | | | | | **High Volume** | | |
| **Small Mono Multi-Function Printer** | | | **Qty:** | | | |  | **Number of users:** | | |  | | | | | | | **If more than 10 users, include Purchase Order # for Midland Computers:** | | | | | | |  |
| **Small Colour Multi-Function Printer** | | | **Qty:** | | | |  | **Number of users:** | | |  | | | | | | | **If more than 10 users, include Purchase Order # for Midland Computers:** | | | | | | |  |
| **Large Mono Multi-Function Printer** | | | **Qty:** | | | |  | **Number of users:** | | |  | | | | | | | **If more than 10 users, include Purchase Order # for Midland Computers:** | | | | | | |  |
| **Large Colour Multi-Function Printer** | | | **Qty:** | | | |  | **Number of users:** | | |  | | | | | | | **If more than 10 users, include Purchase Order # for Midland Computers:** | | | | | | |  |
| **Approval and Cost Code** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Department Cost Code:** | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **Budget Holder Name:** | | | |  | | | | | | | | | **Budget Holder Signature:** | | | | | | |  | | | | | |
| **Date:** |  | | | | | | | | | | | | | | | | | | | | | | | | |
| **GM or Assistant National Director Name:** | | | | | |  | | | | | | | | | | **GM / AND Signature:** | | | | | |  | | | |

**Incomplete forms will be returned to sender**