

Imaging Project Questionnaire

Company Name:

Date:

Contact Name:

Phone:

1. What is the industry type of your business? (Legal, healthcare, manufacturing, etc.)

2. What types of documents do you have to be imaged? (Patient charts, personnel files, HR, etc.) _____
3. Where are the documents currently stored? (In your office, self-storage, record center, etc.) _____
4. What are the documents stored in? (Boxes, filing cabinets, on shelves, in binders, etc.)

5. Approximately how many boxes or filing cabinets total? _____
6. If in Filing Cabinets, how many drawers are in each filing cabinet? _____
7. Approximately how many files per file drawer or box? _____
8. Approximately how many pages per file? _____
9. Are all of the pages standard 8.5" x 11"? ____ If not, are the odd sized pages smaller or larger? ____ Please specify sizes if known.
10. What document preparation is involved with this project (i.e. staples, fasteners, post-it's, odd shaped/sized pages, etc...)? Will we responsible for the preparation of files?

11. Are the pages one-sided, double-sided or both? _____.
12. Are the pages black and white, color or both? _____ Are there any color documents including pictures? ____ If so, what percent?
13. After scanning, do the hard-copy documents need to be re-fastened and put back into the file exactly as they were when before they were scanned, or can they just be placed neatly back into the file? _____.
14. After scanning how frequently will you access these documents? Seldom if ever if the electronic copies are readily available. _____
15. How would you like to be able to access your images? (CD/DVD, Online or Both)

16. How do you want to search for your files? (Name, birth date, ssn, etc.)

17. Do you have a database with the index information for your files? What will be the common index value we will be matching the file to? _____

18. Is this a one time project, or will there be regular pick ups? _____

19. What would you like to do with the documents after they have been scanned? (Destroy, store off-site or return to you) _____.

20. Is this scanning project able to be done off-site at our production facility? _____

21. When would you like to have this project completed? _____

22. Do you currently have any other quotes for this project? _____

Additional Comments: