Data Recovery Service Agreement (v3.1)

Will the data recovered be used for any form of legal or court proceeding? ☐ Yes ☐ No

How did you hear about us: ☐ Internet search? ☐ Referral? _____

Full Name: _____ Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Alternate phone: _____

E-mail: _____

What data is to be recovered (mark)?   pictures   video   music   e-mail   documents   presentations

databases   accounting   graphic designs, **Critical File or Pathnames**: _____

_____

Terms and Conditions

Customer engages XIMATIC LLC to inspect, identify, and remedy problems with and/or retrieve information from customer's data storage device(s). Procedures, instruments, and processes employed by XIMATIC, including processes to select repair parts when needed, are proprietary. Procurement costs of any required customer device repair parts will be paid by customer in advance and are not refundable. Customer will not hold XIMATIC LLC liable for damages that may result from XIMATIC's services, whether incidental or consequential, including but not limited to loss of data, loss of business, pecuniary loss, or other indirect damages. Customer understands that XIMATIC LLC will disclose to the appropriate authorities any information or data that is in violation of state or federal child pornography laws/statues or that implies a plan to harm third parties. Further, customer waives any confidentiality and holds XIMATIC LLC harmless for disclosure of aforementioned information to authorities. Any customer device(s) and/or data left with XIMATIC more than 30 days will be considered abandoned and will be recycled. Payment for donor drive is not refundable.

Print Customer Name: _____

Customer Signature: _____ Date: _____

By signing, customer agrees to the terms and conditions set forth above.

EVALUATION (it will be done by Ximatic)

SD (Storage Device): _____ Brand: _____ Capacity: _____ OS: _____

Does Spindle motor turn?	Does head stack move?	Does BIOS recognize SD?	Can SD be clone?	DIAGNOSTIC:
NO	NO	NO	NO	**PHYSICAL – P3**
YES	YES / NO	NO	NO	**PHYSICAL – P2**
YES	YES	YES	NO	**PHYSICAL – P1**
YES	YES	YES	YES – ERRORS	**LOGICAL – L2**
YES	YES	YES	YES	**LOGICAL – L1**

QUOTATION

DIAG:	PRICE $	DATE:	APPROVAL:

Donor Drive: Y / N $ Paid: Y   N   Date: