



Systems Questionnaire

Please Complete Clearly and In Full

DQPE <small>(SCC Use Only)</small>	Date:		System Name:			
Have you surveyed site? Y / N		Typical Signal Levels (dBuV)	SAT:			
When (date):			DTTV:			
			ANLG:			
			DAB:			
			FM:			
Client requirements (tick)						
SMATV		SAT		Earth Bond ALL Systems		
MATV		DTTV				
IRS		ANLG				
COAXIAL		DAB				
CAT5E		FM				
		AM				
				UHF Channel Numbers		
		BBC1:	C4:	DTTV Muxes:		
		BBC2:	C5:	1:	2:	3:
		ITV1:		4:	5:	6:
		Transmitter:				
New Build?		Existing cable type and approximate age Has the system been updated and approx. when?				
Refurb?						
Type of building	Apts		Number of floors Number of apartments/rooms per floor Number of outlets per apartment/room Maximum cable length to points Middle cable length to points Shortest cable length to points			
	House					
	Office					
	Other					
Number of Risers and Locations						
Headend Equipment Location						
Landlord Power Location(s)						
Are Site Plans Available?						
*** Please note that any additional information i.e., separate apartment blocks etc should be entered and submitted on separate sheets						
Your Company:				Tel:		
Please print your name:				Fax:		
				Email		
Signature:				Further copies of this document are available on request		
Notes / Sketch						
Once complete please fax back to Richard Erbe - 01354 650007 or Email - richard@sccdistribution.co.uk						
<small>This document must be fully completed before quotation can be given. ALL systems must be Earth Bonded.</small>						