

Columbus ServicePoint User License Request Form

Please complete the following information and return a copy of this form, along with a check for the total amount owed, to:

**CSB Database Administrator
Community Shelter Board
111 Liberty Street, Suite 150
Columbus, OH 43215**

Agency Name: _____

Per the licensure contract with Bowman Systems, there is an initial purchase cost of \$250.00 per license.

The above Connecting Agency is purchasing the following:

No. of Licenses	multi ply	Price Per License
	X	\$250.00
Total Amount Enclosed:		

Please include a check for the total amount of this purchase with this form. Licenses will not be made available until payment has been received.

CSP User License(s) to be assigned to: _____

Agency Administrator Signature: _____

Date Request Submitted: _____

The Agency Administrator will be notified via email or phone once the licenses are available.

Columbus ServicePoint ART License Request Form

Please complete the following information and return a copy of this form, along with a check for the total amount owed, to:

CSB Database Administrator
Community Shelter Board
111 Liberty Street, Suite 150
Columbus, OH 43215

Agency Name: _____

Per the licensure contract with Bowman Systems, there is an initial purchase cost per license.

The above Connecting Agency is purchasing the following:

No. of Licenses	Price Per License	Number of licenses requested	Totals
ART Viewer License	\$91 x		
ART Ad Hoc License	\$170 x		
Total Amount Enclosed:			

Please include a check for the total amount of this purchase with this form. Licenses will not be made available until payment has been received.

CSP ART License(s) to be assigned to: _____

Agency Administrator Signature: _____

Date Request Submitted: _____

The Agency Administrator will be notified via email or phone once the licenses are available.