License Reconfiguration Request Form

APPX Software, Inc.
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Jacksonville, FL 32223
Phone 1-800-879-2779
Fax 1-904-880-6635

This form must be completed and submitted by a customer who wishes to move the features of one or more licenses to one or more other licenses. The appropriate Reconfiguration Fees will apply. This form should not be used for a simple change of serial number, company name, or CPU location (use Registration Change Request for those), or an add-on of user rights, design rights, or other features.

Customer Information

Customer Name		Customer No. (first part of license Registration Code)		
Mailing Address		City	State/Province	Postal Code
Contact Person	Phone No.	E-mail		

License Features to be Removed (if more than one license is involved, list each separately)

Registration Code (e.g., 001234-AA-01)	User Rights	Design Rights	Database Interfaces, Business Applications, or other features (number of users, if applicable)
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Registration Code (e.g., 001234-AA-01)	User Rights	Design Rights	Database Interfaces, Business Applications, or other features (number of users, if applicable)

If one or more new licenses are being requested, complete this section

Company Name		CPU Location (City, State/Province)
CPU Type (Platform)	CPU Model (optional)	CPU Serial Number
User Rights / Design Rights	Other licensed features (database interfaces, business applications)	

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User Rights / Design Rights	Other licensed features (database interfaces, business applications)	

If additional features are being requested for existing licenses, complete this section

Registration Code (e.g., 001234-AA-01)	Add'l User Rights	Add'l Design Rights	Add'l Database Interfaces, Business Applications, or other features
Registration Code (e.g., 001234-AA-01)	Add'l User Rights	Add'l Design Rights	Add'l Database Interfaces, Business Applications, or other features
Registration Code (e.g., 001234-AA-01)	Add'l User Rights	Add'l Design Rights	Add'l Database Interfaces, Business Applications, or other features

Customer Name	Customer No. (first part of license Registration Code)

Comments

Customer Certification

In consideration of one or more new licenses being issued, the customer agrees to discontinue use of the currently held APPX software license(s) specified above, and to remove same, within _____ days of the date of this request. Customer acknowledges that this request, when accepted by APPX through issuance of one or more new licenses, shall become an Addendum to the previously executed Authorized Sublicense Agreement, of which all terms and conditions remain in force. Customer also acknowledges that this change may result in a permanent loss of license value.

Signature	Date
Print Name and Title	E-mail Address or Fax Number to send new license(s) to:

Send completed and signed form to APPX Software, Inc., by fax to 1-904-880-6635, or by e-mail to brenda@appx.com