

**Site Survey: Access** 

Company:\_\_\_\_\_





## **Site Survey: Access**

Customer: Date: Technician:
Access device number: Access device location:
SUPREMA BioLite N2  SUPREMA BioEntry W2  SUPREMA BioEntry P2  FaceStation2
Mag-lock 1? Weatherproof? Yes No
Mag-lock 2? Weatherproof? Yes No
Z/L bracket?
Reader in? N2 W2 P2 FS2 Reader out? N2 W2 P2 FS2
PTE?
Break glass?
Type of door?
Fire door? Yes No
Photos?
Wall type?
Confirm location of network points / fuse spur?
POE if applicable?
Reader & Network Cable run? metres
Number of network points required?
Notes