



## Administrator Account Setup Form

Please complete the following information in order to authorize access to the device as identified below on the PULSAlink cloud network.

### Company Information

Company Name \_\_\_\_\_ (PulsaLink Customer Name)

### Company Administrator information

User Name \_\_\_\_\_ (E-Mail Address)

Password \_\_\_\_\_ (Minimum length 8, 1 Special Character (Symbol), 1 Number, 1 Capital Letter)

Name \_\_\_\_\_

Phone number \_\_\_\_\_

Company \_\_\_\_\_ (PulsaLink Customer Name)

Pulsafeeder Account number \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Zip \_\_\_\_\_

- 1) Configure my PULSAlink account so that all controllers ordered are automatically entered under the group named "Unassigned" we will manage users and groups for all of the controllers in our account.
- 2) Configure my PULSAlink account so that all controllers ordered are automatically entered under my account. Pulsafeeder can manage user names and passwords for controller access by receiving activation forms from the field that are shipped with each unit. Users will be set up as "manager" level and controllers will be in the group "Unassigned" I understand that this option could result in unauthorized access to controllers.

I certify that I am the above companies authorized representative.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Print

Fax this form to 800-456-4085

E-mail this signed form to [ppgspotech@idexcorp.com](mailto:ppgspotech@idexcorp.com)