



Wi-Fi Customer Requirements Questionnaire

Please complete all sections to achieve best results in wireless deployment planning.

Use this questionnaire to capture the information required to identify the best wireless access point solution for your environment. Complete this form in order to receive installation labor-time estimates, number of Access Points required, Ethernet cabling infrastructure requirements, and WatchGuard Wi-Fi controller configuration from us.

Please include a diagram of the facility. Diagram should show all coverage areas. Please indicate in-scope and out-of-scope coverage areas on the facility diagram you submit.



Section 1 – Contact Information

Company Name _____

Address _____

Contact Name _____ Phone Number _____

Email Address _____

Customer Name _____

Address _____

Contact Name _____ Phone Number _____

Email Address _____

On-site Contact Name _____

Phone Number _____ Email Address _____

Project Description _____

Section 2 – Facility

ENVIRONMENT

- Office Education Small Retail Warehouse Manufacturing Healthcare Hospitality Shopping Center Public Venue

Other: _____

SITE LOCATION _____

COVERAGE

- Inside Outside

Please indicate in-scope and out-of-scope coverage areas on the facility diagram you submit.) Site map formats – .pdf, .bmp, .dib, .gif, .jpg, .png, .tiff

WatchGuard Representative: _____

Date: _____

DIMENSIONS

Total length and/or width in feet or meters _____

Sample Room Dimensions (length and/or width in feet or meters) _____

BUILDING INFORMATION

Interior Construction

Wall Material Steel Brick Concrete Wood Glass

Other: _____

Door Material Steel Brick Concrete Wood Glass

Other: _____

Please mark walls and doors on your facility diagram.

Specify the material of any large objects and mark their location on your facility diagram.

Ceiling Information

Sheet Rock Drop Ceiling Steel Plaster

Other: _____

Height in Feet or Meters _____

Exterior Construction

Steel Brick Concrete Wood Glass

Other: _____

Section 3 – Physical Network

NETWORK CLOSET INFORMATION

Please indicate network closets on your facility diagram.

NETWORK CABLING REQUIREMENTS

Cat-3 Cat-5 Cat-6

NETWORK CABLING ACCESS

Ceiling Crawl Space Drop Ceiling Floor Crawl Space Conduit

NETWORK SWITCH INFORMATION

Ports Available Yes No

WatchGuard Representative: _____

Date: _____

Section 4 – Wireless Network Users

Inline Power Available Yes No

PoE Injectors Available Yes No

Bandwidth capacity of the AP switch port (between the AP and the edge switch). Specify in Mbps/Gbps _____

Bandwidth capacity of the uplink switch port (between the edge switch and the core/distribution switch. Specify in Mbps/Gbps _____

WIRELESS PROTOCOL SUPPORT REQUIREMENTS

802.11b 802.11g 802.11a 802.11n 802.11ac

END USER DEVICE INFORMATION

Client Device Types, Vendor, Operating System (smartphones, tablets, laptops) _____

Client Device Wi-Fi Adapters _____

Wireless Phone Types _____

Total number of wireless users expected _____

Number of simultaneous active wireless client connections expected _____

Section 5 – Applications

WIRELESS INTRUSION PREVENTION SYSTEM (WIPS)

Yes No

WIRELESS LAN CONTROLLER REDUNDANCY

Yes No

TRAFFIC TYPE REQUIREMENTS

Data Voice Video Guest Access

Other: _____

Specify per-user bandwidth requirements _____

APPLICATION SUPPORT REQUIREMENTS

Web Email Audio Video Printing File Sharing Device Backups

Other Applications _____

Application Throughput Requirements _____