

Amicus POS System Feature Request Form

In order to help us provide a better service and standardise all product feature requests that we can evaluate and prioritise requests appropriately, please fill this form and send back to us by email or fax.

* Required Information

*Feature Requester:		*Contact Person:	
*Phone:		Fax:	
Email :		Request Date:	
Address:			
*For Which Business:		*Current Amicus Version:	
*Payment Option(circle one):	High Urgent (Charged by hour)	Med Business Case Proposed	Low At NBS discretion
*Summary of Requested Features (Document what you would like to add to the product development plan)			
Discuss the benefits and value of the changes			

<i>Office Use Only</i>			
Estimated Time:	Payment Received: Y/N	POS Version:	Assigned to:
Estimated Cost:	Jira ID:	Case ID:	Date: