National Toll Payment Services Plc.

Annex 8
Evaluation sheet for local review

Date of review:	_____ month _____ day 20___ year	____ : ____

Name of reseller partner, operator:	

Address of Point of Sale:	

On behalf of NTPS Plc.:	

On behalf of Point of Sale:	

Type of Point of Sale:	☐ Border crossing/Spedition	☐ Fuel station	☐ Other store	☐ Truck parking lot

Form of validation:	☐ Integrated cash register syste	☐ Other POS	☐ WEB	

Form of planning:	☐ PC - planning by seller	☐ PC - planning by custom	☐ Kiosk:	☐ No planning
	☐ Tablet - planning by seller	☐ Tablet - planning by customer		

Inspection of sales conditions:

1. Address data (Do the data of the point of sale match the registered data?):	☐ Compliant	☑ Non-compliant	
2. Vignettes, pictograms designating the point of sale (in compliance with the effective regulation):	☐ There is	☐ There is not	
3. Price information table:	☐ There is	☐ There is not	
4. Information poster (size A3):	☐ There is	☐ There is not	
5. Are the point of sale's copies of the accounting documents available and handled in accordance with the contract?	☐ Compliant	☐ Non-compliant	☐ Not applicable
6. Publications for information (leaflets):	☐ There is	☐ There is not	☐ Not applicable
7. Training records:	☐ Compliant	☐ Non-compliant	
8. HU-GO kiosk is easily accessible for the customer:	☐ Yes	☐ No	☐ Not applicable
9. HU-GO kiosk is operating properly:	☐ Yes	☐ No	☐ Not applicable
10. Handling of reversal customer documents:	☐ Compliant	☐ ___ pieces are missing	

Note:

_____

_____

_____
National Toll Payment Services Plc.
(L. S.)

_____
Point of Sale representative
(L. S.)