

GTOCP3 Chip Upgrade Order Form – Chip V2

Mount using GTOCP3 unit : _____

Mount Serial # (if applicable): _____ (required for Astro-Physics mount)

Control Box Serial # _____ (required for all mounts, except early GTOCP3s that do not have one)
Name: _____

Address: _____ Phone 1: _____
_____ Phone 2: _____
_____ Phone 3: _____

Email Address 1 (primary email contact): _____

Email Address 2 (alternate email contact): _____

APCC Email Address: (Required for APCC trial or purchase): _____

INFORMATION REQUIRED: Date and version of chip in current control box: _____
(How to determine? Chip version readout from ASCOM or remove the cover of GTOCP3 and read the label on the chip)

CHOOSE OPTION:

___ Customer installs chip – current chip is Q or earlier

\$ 80.00 USD Chip, Extraction Tool, Instruction Sheets (CHIPKITV2)
_____ Add 8.25% sales tax if IL resident \$6.60
_____ Add shipping US: USPS Priority Mail = \$ 7.00, International: depends on destination
_____ Total, please fill out payment information below.

OR

___ Customer installs chip – non-encoder mounts - current chip is R, S, S1, T, U, V or V1

\$ 55.00 USD Chip, Extraction Tool, Instruction Sheets (CHIPKITV2)
_____ Add 8.25% sales tax if IL resident \$4.54
_____ Add shipping US: USPS Priority Mail = \$ 7.00, International: depends on destination
_____ Total, please fill out payment information below.

OR

___ Customer installs chip – Absolute or Precision Encoder mounts (applies to 1100, 1600, 3600)

No Charge Chip, Extraction Tool, Instruction Sheets (CHIPKITV2 for GTOCP3)
No Charge Chip for GTOAE or GTOELS Control Box, if needed
No Charge Shipping

Please contact Astro-Physics if you would like us to install the chip for you. There will be an additional labor charge.

Please see *Payment Options* on following page.

By ordering the chip to install him/herself, the customer acknowledges that s/he assumes responsibility for installing it correctly per instructions. If the chip carrier is damaged, the GTO control box must be sent back to Astro-Physics for repair. The charges will be \$180 plus shipping.

Please fill in the address you would like your upgrade shipped to (please write "SAME" if as above).

SHIP TO ADDRESS: _____

Mail form to: Astro-Physics or Fax: (815) 282-9847
11250 Forest Hills Rd.
Machesney Park, IL 61115

For Astro-Physics use only.	DR _____	CN _____	SON _____
P/MOP _____	VC _____	PICK _____	GTO UPDATE COMPLETE _____

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Payment Options:

Check or Money Order Enclosed

Wire Transfer (please request transfer instructions from sales at astro-physics.com)

Credit Card (Discover/MasterCard/VISA)

Name as it appears on credit card (please print): _____

Credit Card Number: _____

Exp. Date (Month/Year): _____ / _____

3-digit verification (back of card): _____

Billing address of credit card being used: _____

Signature: _____