

**C TECH DEVELOPMENT CORPORATION**

5846 So. FLAMINGO RD. #180  
COOPER CITY, FL 33330  
PHONE: 941.315.5740  
FAX: 941.210.6339  
SALES@CTECH.COM



## Organization Staff Level Certification for C Tech’s Enterprise License

The purpose of this letter is to certify the *staff level* for your organization. **For the purposes of this certification, *staff level* is defined as the number of full-time equivalent employees and in-house consultants employed by your organization at the time of your license renewal or commencement as applicable.** C Tech’s reason for needing this certification is that the pricing for our Enterprise unlimited license of Earth Volumetric Studio is based on the number of employees, rather than the number of software users.

Organizations must be a legal entity which files a tax return with the appropriate government agency (e.g., U.S. IRS). If the organization has subsidiaries or affiliates, these must be wholly owned by the organization or cannot be licensed under the parent. The *staff level* must include all personnel of the organization being licensed.

The undersigned certifies that their organization’s *staff level* as defined above is correct. The undersigned also acknowledges that they are empowered by their organization to bind it on contractual issues. Company growth or acquisitions during the annual license period which results in no more than a 15% staff level increase do not need to be addressed during the year. However, if growth or acquisitions during the annual license period result in more than a 15% increase, a prorated license fee increase must be applied and paid.

The undersigned acknowledges that misrepresentation of the *staff level* for the purposes of paying reduced subscription fees would constitute a violation of C Tech’s License Agreement and could subject the individual and/or organization to civil and/or criminal penalties.

### STAFF LEVEL

(Number of equivalent full-time employees)

*Please enter the actual Staff Level. If an estimate is used, round up to ensure that the level provided is not underestimated.*

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

Name & Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Phone & email: \_\_\_\_\_