



Software License Ownership Transfer Agreement

Current Customer Information

Original Customer Name: _____ Customer ID #: _____ Phone: _____

Office Address: _____ City: _____ Prov/State: _____ Postal /ZIP: _____

Product License To Be Transferred

ABELDent

Effective date of License Ownership Transfer: _____

Seller's Agreement

I agree that I am the current owner of the ABEL software license and I have full authority to sign this legally binding agreement to transfer the license to the purchaser named in this agreement. I agree that the ABEL software product has been removed from any computer which was not included in the sale of the office. I agree that all product CD-ROMs and printed materials have been left in the possession of the purchaser. I furthermore agree that neither the application nor supporting materials have been copied and kept in any form including, but not limited to, both printed and digital forms. I hereby relinquish all control and ownership of the ABEL license to the purchaser listed in this agreement.

Full Original Owner's Printed Name

Original Owner's Signature

Date

Practice Name

Purchaser's Agreement

I agree that I have read and understood the ABEL Software License Agreement and Terms & Conditions. I understand that ABEL makes no other warranties whatsoever. I understand that ABEL is not bound by this Agreement until it is accepted by ABEL and understand that I am obligated to the terms of this Agreement upon execution of said Agreement by signing below. I also agree to assume all active pre-paid Software Maintenance agreements and Telephone Support plans currently held by the seller. **If there is no Software Maintenance agreement currently in effect, I agree to subscribe to one before the license transfer can be fully completed. I declare that all information provided is complete and accurate.**

Purchaser's Name and Professional Designation (please print)

Email Address

Purchaser's Full Signature

Date

Practice Name

Office Address

City

Prov/State

Postal /ZIP

Phone: _____ Fax: _____

License Transfer Fee

ABEL requires a \$300 plus tax license transfer fee payment to be processed before the license ownership transfer can be completed. The license transfer fee includes services for server software configuration changes required for the new owner and administrative license transfer processing. Please complete the financial information below for credit card payment or to pay using existing ABEL service hours on account.

Payment Method: Credit Card OR Reduce 2 hours from my ABEL account

ABEL accepts Visa, MasterCard and Amex (Canada Only). For Privacy and security compliance reasons, please do not fax or email credit card information. Please phone in your credit card information to ABEL Accounting at 1-800-267-2235 ext. 6. We thank you in advance for your cooperation in this matter.

Complete all sections of this form and fax or email to Accounting for processing.