COMMUNICATIONS SERVICE REQUEST

NCTS Base Communications Guam

1. Requesting Activity:	2. Activity Request Number	3. Request Date:	4. Fldr No.:

5. Desired Completion Date:	6. Person to Contact (Name, Title & Telephone Number)

7. Bldg Number:	8. Desired Directory Listing

9. Service Requested

Check Service to be provided

- ☐ Install
- ☐ Remove
- ☐ Change
- ☐ Move
- ☐ LAN Drop
- ☐ Cost Estimate
- ☐ Tech Assist/Site Survey

10. Description of Service

DIAL SERVICE

DSN Access Line
- ☐ Class A DSN

Business Line
- ☐ Class B

Official Line
- ☐ Class C

Direct Line
- ☐ Class D

11. Instrument / Equipment *(Check required features)*

(SINGLE LINE)

☐ Standard ☐ Speakerphone ☐ Caller ID

(DUAL LINE / 2 LINE)

☐ Standard ☐ Speakerphone ☐ Caller ID

(MULTILINE/DIGITAL BUSINESS SET)

☐ Standard ☐ Speakerphone ☐ Caller ID

(SPECIAL INSTRUMENTS)

☐ Weather Proof ☐ Explosion Proof ☐ Red Phone
☐ Loud Ringer Bells ☐ Strobe Lights ☐ Headsets

12. Long Distance Account

- ☐ NETWORX Account
- ☐ ISVS Account

13. Switch Optional Features

☐ Conf 6/12/30 ☐ Ring Again ☐ Meet Me Conf
☐ Call Forward Intra ☐ Voice Mail ☐ Group InterCom
☐ Call Fwd Universal ☐ Voice Menu ☐ Other (Specify in Blk 16)

15. Others

- ☐ Other (Specify in Blk 16)

14. Special Services

☐ ISDN ☐ 100mbs ☐ DS3
☐ Metallic Cable Lease ☐ T1 ☐ DSO 64kbs
☐ VTC Services ☐ Fraction T1 ☐ Other (Specify in Blk 16)

16. Description of Work to be Performed / Details of Services

(Specify requirements and other pertinent information)

Forward CSR to Email Address: M-GU-NCTS-N91CustomerService-GS@FE.NAVY.MIL

17. Requested by:	18. Approved By:	19. Restoral Priority

20. CSR NUMBER:	21: RECEIVED BY: