

# COMMUNICATIONS SERVICE REQUEST

NCTS Base Communications Guam

<b>1. Requesting Activity:</b>	<b>2. Activity Request Number:</b>	<b>3. Request Date:</b>	<b>4. Folder Number:</b>

<b>5. Desired Completion Date:</b>	<b>6. Person to Contact (Name, Title &amp; Telephone Number):</b>

<b>7. Bldg Number:</b>	<b>8. Desired Directory Listing:</b>

<b>9. Service Requested</b>	<b>10. Description of Service</b>	<b>11. Instrument / Equipment (Check required features)</b>
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<b>CHECK SERVICE TO BE PROVIDED</b> <input type="checkbox"/> Install <input type="checkbox"/> Remove <input type="checkbox"/> Change <input type="checkbox"/> Move  <input type="checkbox"/> LAN Drop <input type="checkbox"/> Cost Estimate <input type="checkbox"/> Tech Assist/Site Survey	<b>DIAL SERVICE</b>  <u>DSN Access Line</u> <input type="checkbox"/> Class A DSN <u>Business Line</u> <input type="checkbox"/> Class B <u>Official Line</u> <input type="checkbox"/> Class C <u>Direct Line</u> <input type="checkbox"/> Class D	<b>(SINGLE LINE)</b> <input type="checkbox"/> Standard <input type="checkbox"/> Speakerphone <input type="checkbox"/> Caller ID <b>(DUAL LINE / 2 LINE)</b> <input type="checkbox"/> Standard <input type="checkbox"/> Speakerphone <input type="checkbox"/> Caller ID <b>(MULTILINE / DIGITAL BUSINESS SET)</b> <input type="checkbox"/> Standard <input type="checkbox"/> Speakerphone <input type="checkbox"/> Caller ID <b>(SPECIAL INSTRUMENTS)</b> <input type="checkbox"/> Weather Proof <input type="checkbox"/> Explosion Proof <input type="checkbox"/> Red Phone <input type="checkbox"/> Loud Ringer Bells <input type="checkbox"/> Strobe Lights <input type="checkbox"/> Headsets
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<b>12. Long Distance Account</b> <input type="checkbox"/> NETWORX Account <input type="checkbox"/> ISVS Account	<b>13. Switch Optional Features</b> <input type="checkbox"/> Conf 6/12/30 <input type="checkbox"/> Ring Again <input type="checkbox"/> Meet Me Conf <input type="checkbox"/> Call Forward Intra <input type="checkbox"/> Voice Mail <input type="checkbox"/> Group InterCom <input type="checkbox"/> Call Fwd Universal <input type="checkbox"/> Voice Menu <input type="checkbox"/> Other <div style="text-align: right; font-size: small;">(Specify in Blk 16)</div>
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<b>14. Others</b> <input type="checkbox"/> Other (Specify in Blk 16)	<b>15. Special Services</b> <input type="checkbox"/> ISDN <input type="checkbox"/> 100mbs <input type="checkbox"/> DS3 <input type="checkbox"/> Metallic Cable Lease <input type="checkbox"/> T1 <input type="checkbox"/> DSO 64kbs <input type="checkbox"/> VTC Services <input type="checkbox"/> Fraction T1 <input type="checkbox"/> Other <div style="text-align: right; font-size: small;">(Specify in Blk 16)</div>
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<b>16. Description of Work to be Performed / Details of Services</b> (Specify requirements and other pertinent information)

**17. Fill out Section 17 only if Request is for a Commercial Circuit**

<b>17.1. Purpose of Commercial Circuit:</b>

<b>17.2. Location of Termination (Base / Building / Room):</b>

<b>17.3. Commercial Provider, Type of Commercial Circuit, Service to be provided:</b>

<b>17.4. Agency / Command Funding Commercial Circuit:</b>

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

<b>18. Requested By:</b>	<b>19. Approved By:</b>	<b>20. Restoral Priority:</b>

<b>21. CSR Number:</b>	<b>22. Received By:</b>