|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Requesting Department | Service Request Coordinator | | Phone # | **Work Order # (IT Only)** |
| Email Address | Centrex Account (xx-xxxxxx-xxxxx) | | | Mail Stop |
| Site Location (Address, City) | | Building Number (if known) | | New Location  ☐ Yes ☐ No |

**Service Requested**

|  |  |  |
| --- | --- | --- |
| **Circuit**  ☐ Add New Circuit  ☐ Change Existing Circuit  ☐ Disconnect Circuit  ☐ Other | **Data Speed**  ☐ 20 Meg ☐ 50 Meg  ☐ 100 Meg ☐ 150 Meg  ☐ 250 Meg ☐ 500 Meg  ☐ 750 Meg ☐ 1 Gigabit  ☐ Other  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Hand-Off (Your location)**  ☐ Copper  ☐ Single-Mode Fiber  ☐ Multi-Mode Fiber |
| Existing Circuit ID (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Building and Room location for circuit termination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Remarks:  Onsite Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

|  |
| --- |
| **Texas A&M IT Use Only**  Vendor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Quote Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ TTVN Notified: \_\_\_\_\_\_\_\_\_\_\_\_\_  New Circuit ID/Account #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  POP Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Aggregation Circuit ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Hand-Off (POP): ☐ Copper ☐ Single-Mode Fiber ☐ Multi-Mode Fiber  Additional Remarks: |
| \*Please note that TTVN Costs are not included in any charges quoted by Telecommunications. Approval by TTVN is required prior to connecting any new circuits to TTVN equipment. Please contact TTVN for pricing and questions. |

|  |  |  |
| --- | --- | --- |
| Date Work Order Prepared | Departmental Approval | |
| Signature | Date |
| Service Date Desired |