Fermilab
Telecommunications Service Request

Submit to: Telecommunications MS 228, Fax: ext. 3405, Email: telecom@fnal.gov
See Instructions for assistance completing this request.

Please allow 2 weeks for processing

Date of Request:	**Date Needed:**
Division, Section, or Center:	**Department:**
Location of Work (BLDG, FLOOR, RM):	
Existing Phone Numbers:	
FNAL TELSET US GOVT PROP DOE 05678 **Phone Telset Tag** (REQUIRED): This small silver metal tag is usually located on the bottom of the phone	
Contact: Name, Ext., Location	**Approval:** Supervisor or Division Designate

DESCRIBE WORK DESIRED IN SPACE BELOW:
If necessary, please provide a diagram of the work requested. Include desired calling features or restrictions, new numbers or data circuits required, and phone equipment required.
If requesting a new display phone, please attach a completed purchase requisition. If requesting voicemail, please provide 1) Name & ID#; 2) mail station; 3) type of phone.

Work Desired:

INSTALLER USE ONLY

EXT# _____ EXB01 _____	Location	S/N & Type
Hse/Pair		
Hse/Pair		
Hse/Pair		
EXT# _____ EXB01 _____	Location	S/N & Type
Hse/Pair		
Hse/Pair		
Hse/Pair		
EXT# _____ EXB01 _____	Location	S/N & Type
Hse/Pair		
Hse/Pair		
Hse/Pair		
EXT# _____ EXB01 _____	Location	S/N & Type
Hse/Pair		
Hse/Pair		
Hse/Pair		

TELECOM USE ONLY BELOW THIS LINE ***FOR FERMI / AT&T USE ONLY***

	FERMILAB	AT&T
Order Number		
Order Date		
Placed By/To		
Due		
Date Completed		

UPDATES
NORM _____ Inventory _____ ISI _____/_____/_____

VOICEMAIL ○ Requested ○ Completed (BY) _____
○ Visual ○ Audible