

**Navajo Nation Telecommunication & Utilities Department**  
**Telephone Service Request**

**Departmental Information - Section #1**

Department Name:	<input type="text"/>	Date:	<input type="text"/>	Email address:	<input type="text"/>
Contact Person:	<input type="text"/>	Contact Telephone No.:	<input type="text"/>		
Business Unit #:	<input type="text"/>	<small>*Six digit account number (General or External Funds)</small>			
Physical Address:	<input type="text"/>				
<small>(Current)</small>	<input type="text"/>				
	<small>(Street Address, Highway, Route Number, Building number or name)</small>				
Requestor's Name:	<input type="text"/>	Supervisor's Name:	<input type="text"/>		
Requestor's Signature:	<input type="text"/>	Supervisor's Signature:	<input type="text"/>		

**Type of Service Requesting - Section #2**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> New Installation(s)<br><small>*complete section #3</small>    | <input type="checkbox"/> Voice Mail Services<br><small>*complete section #6</small>           | <input type="checkbox"/> Repair/Maintenance<br><small>*complete section #9</small> |
| <input type="checkbox"/> Line Move(s)<br><small>*complete section #4</small>           | <input type="checkbox"/> Programming of line/equipment<br><small>*complete section #7</small> |  |
| <input type="checkbox"/> New Equipment Purchase<br><small>*complete section #5</small> | <input type="checkbox"/> Disconnection<br><small>*complete section #8</small>                 |  |

**Additional Information for Type of Service Requested Above**

**For New Installation(s): - Section #3**

Circle Type of Service: Centrex or Key System

Circle Type of Telephone Line: Single or Business (Specify if ordering both type of telephone lines)

Circle Type of telephone set: **Single sets** - M9125 (speaker phone), Quantity \_\_\_\_ OR  
Polycom 2200 (conference phone), (with display screen or without), Quantity \_\_\_\_.  
**Business set** - M5316, Quantity \_\_\_\_ \*keysheet will need to be completed  
(Telephone sets have to correspond with type of telephone line selected.)

Choose one Dialing Option: ☐ Station-to-station ☐ Four States  
☐ Local ☐ Western States  
☐ Arizona ☐ 48 States

Additional Calling Features: (View website: [www.nntu.navajo-nsn.gov](http://www.nntu.navajo-nsn.gov) for calling features)


Floor Plan: ☐ (attach to telephone service form) \*Please mark where new line with be installed

**For Line Move(s): - Section #4**

Circle Type of Line Move: Internal or External

Provide New Physical Address:

Floor Plans: ☐ Current location of line(s) ☐ New location of line(s)  
(Please attach the two floor plans to the Telephone Service Form)

**New Equipment Purchase: - Section #5**

Choose type(s) of Equipment: (View website: [www.nntu.navajo-nsn.gov](http://www.nntu.navajo-nsn.gov) for available equipment)

Indicate Telephone Number for Equipment Replacement:

Quantity:  ☐ Telephone sets Model No.   
 Quantity:  ☐ Base cords Indicate Type   
 Quantity:  ☐ Receiver cords Indicate Type   
 Quantity:  ☐ Power Boxes Indicate Type   
 Quantity:  ☐ Wireless Office Headsets with Lifter

**Voice Mail Services - New & Existing (Prohibited on main telephone number) - Section #6**

Affected Telephone Number:

User's Full Name:

User's Job Title:

Justification: (Why service is required to perform their duties and responsibilities)


**Programming of line/equipment: - Section #7**

Specify telephone calling feature(s): (View website: [www.nntu.navajo-nsn.gov](http://www.nntu.navajo-nsn.gov) for calling features)


**Disconnection: - Section #8**

Identify Telephone Number(s):

**Repair/Maintenance of Existing Telephone Services: - Section #9**

Specify Telephone Number:

Type of Repair and Maintenance:

**Navajo Nation Telecommunication & Utilities Staff Use Only**

Submitted to Frontier Communications on:

Remarks: