

Navajo Nation Telecommunication & Utilities Department
Telephone Service Request

Departmental Information - Section #1

Date:

Department Name: Email address:

Contact Person: Contact Telephone No.:
(must be a working number)

Business Unit #: **Six digit account number (General or External Funds)*

Physical Address:
(Current)
(Street Address, Highway, Route Number, Building number or name)

Requestor's Name: Supervisor's Name:

Requestor's Signature: Supervisor's Signature:

Type of Service Requesting - Section #2

- New Installation(s) **complete section #3*
- Line Move(s) **complete section #4*
- New Equipment Purchase **complete section #5*
- Voice Mail Services **complete section #6*
- Programming of line/equipment **complete section #7*
- Disconnection **complete section #8*
- Repair/Maintenance **complete section #9*

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 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 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 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: _____

