

North American ISDN BRI Order Request Form

1. Order Originator

- 1.1) Customer/End User _____ Agent _____ Carrier _____ Other _____
 1.2) Order Date: _____

2. Carrier/Agent Information (completed by Carrier, Agent, or Other)

- 2.1) Company Name: _____
 2.2) Contact Name: _____
 2.3) Contact Tel. No: _____ 2.4a) Contact FAX: _____
 2.4b) Contact Email Address: _____
 2.5) Order No./Agent No: _____ 2.6) Letter of Agency: Yes ___ No ___

3. Customer Information (completed by Customer/End-user or Agent)

- 3.1) End User (Directory) Name: _____
 3.2) End User Service Address: _____
 3.3) End-User Tel. No: _____
 3.4) Contact Name: _____
 3.5) Contact Tel. No: _____ 3.6a) Contact FAX: _____
 3.6b) Contact Email Address: _____
 3.7) Purchase Order Number: _____
 3.8) Billing Name: _____
 3.9) Billing Address: _____
 3.10) Billing Tel. No: _____
 3.11) Billing Contact Name: _____
 3.12) Billing Contact Tel. No: _____

4. Order Information (completed by Customer/End-user or Agent)

- 4.1) Type of Request: New ___ Disconnect ___ 4.6a) Equipment/Make/Model: _____
 Change ___ Conversion ___ 4.6b) Call Forward Busy/Don't Answer Tel No: _____
 Tel No. (PDN 1): _____
 Tel No. (PDN 2): _____ 4.6c) Application: _____
 4.2) Customer Desired Due Date: _____ 4.7) Carrier Selection: Intralata _____ Interlata _____
 4.3) Service Requested as: Business ___ Centrex ___ 4.7a) Packet: _____
 Residential ___ 4.7b) Ckt Sw. Data: _____
 4.4) Directory Listing: 4.7c) Voice: _____
 Yes ___ 4.8) Inside wiring: Yes ___ No ___
 No ___ Directory Assistance: Yes ___ No ___ 4.8a) Jack: 8 Position Jack: ___ Other: _____
 Yellow Page: 4.9) Inside wiring repair plan: Yes ___ No ___
 Yes ___ Heading: _____ Type: _____
 No ___ 4.10) No. of BRIs (Max. 3 per form): _____
 4.5) Blocking: Caller ID ___ 900 ___ 976 ___ 4.11) Attachment(s) included: Yes ___ No ___
 4.6) ISDN Ordering Code (IOC): _____ 4.12) Total No. of Attachment Pages Included: _____
 4.13) Remarks: _____

5. Customer Confirmation Details

- 5.1) Order Date: _____
- 5.2) Order No./Agent No./Purchase Order Number: _____
- 5.3) End User (Directory) Name: _____
- 5.4) End User Service Address: _____

6. Firm Order Confirmation (completed by Service Provider)

- 6.1) Confirmed Due Date: _____
- 6.2) Service: Residential ___ Business ___ Centrex ___
- 6.3a) Monthly Charge per BRI: _____ 6.3b) Installation Charge per BRI: _____
- 6.4) Service Provider Contact Name: _____
- 6.5) Service Provider Tel. No: _____
- 6.6) BRI Type: NI ___ Other: _____
- 6.7) Switch Type: 5ESS ___ DMS100 ___ EWSD ___ Other: _____
- | 6.8) | BRI 1 | BRI 2 | BRI 3 |
|--------------------------------|-------|-------|-------|
| ECCKT ID: | _____ | _____ | _____ |
| Order Number: | _____ | _____ | _____ |
| SPID 1: | _____ | _____ | _____ |
| Primary Directory No. (PDN 1): | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| SPID 2: | _____ | _____ | _____ |
| Primary Directory No. (PDN 2): | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| SPID 3: | _____ | _____ | _____ |
| * Packet Telephone No. (XTN): | _____ | _____ | _____ |
| | _____ | _____ | _____ |
- * NOTE: A SPID may or may not be provided with the Packet Telephone Number. This depends on the ISDN Ordering Code (IOC), the switch type, and the procedures of the service provider.
- 6.9) Service Provider Trouble Reporting Tel. No: _____
- 6.10) Remarks: _____

Important

This entire form needs to be sent by the originator to the service provider. The service provider should return all pages as part of the confirmation of the order.