

TELECOMMUNICATION'S ACTIVATION FORM

REVISED AS OF: FEB 5, 2007

CONTACT INFORMATION:

BILLING INFORMATION:

Department: _____
 Name: _____
 Phone: _____
 Fax: _____
 e-mail: _____
 Campus Address: _____

Account for work order charges: ** _____
 Account for monthly phone charges: ** _____
 Authorized Signature: ** _____
 Date: _____

****Account number and signature from an authorized signatory is mandatory. Work will not be processed without these pieces of information!**

PRICE LIST FOR STATE ACCOUNTS (FOR NON-STATE ACCOUNTS, ADD 15.51 % SURCHARGE):

*Install new voice jack	\$215	Monthly charge per extension	\$25
*Install new Data Jack	TBD	Urgent Request	\$75
Activate an available voice jack	\$75	Urgent Request for VM or PSC only	\$40
Activate an available data jack	\$200	Please initial here for Urgent Request _____	

**All data jacks and some voice jack installations are subject to price quote from Vendor.*

1. What is the building and room number? _____

2. Do you need a new voice and/or data jack installed? (If yes, check one or both) **Voice** **Data**
 If no, what is the available jack you would like to activate (V) / (D) _____

3. Do you need a new extension? Yes No - If no, what is the extension? _____

Office Use Only
Ext: _____

4. Who is assigned to this extension? _____

5. Will this person need a Personal Security Code (PSC) for long distance calls? If so, indicate the calling capability:
 NO PSC TO BE ASSIGNED **CONTINENTAL US** (check the highest capability needed)
 518 AREA CODE **INTERNATIONAL**
 NEW YORK STATE

Office Use Only
PSC: _____

6. Do you need voicemail? Yes or No

Office Use Only
Template: _____

7. Call Pick Up Feature: Do you need the ability to pick up someone else's phone that is ringing, from this extension?
 If so, list the extensions that should be in the pick up group. _____

8. Do you need a telephone instrument? If so, please check the one that you need.

<input type="checkbox"/> Do not need a telephone instrument	<input type="checkbox"/> Single line wall phone (\$36)
<input type="checkbox"/> NEC single line desk phone (\$36)	<input type="checkbox"/> Single line Teledex speaker phone (\$105)
<input type="checkbox"/> Dterm 16 button (multi-line, digital) phone (\$320)***	<input type="checkbox"/> Dterm 8 button (multi-line, digital) phone (\$275)***

***If you are purchasing a Dterm phone please follow the link http://www.albany.edu/its/tel_glance_telephone_forms.htm to the 16 or 8 button multi line form. Fax that form as well as this request to 73810.

9. What extension would you like listed for this person on the University Switchboard? _____

10. Who is the contact person to coordinate access for the technician? _____

TELECOMMUNICATION'S CONTACT INFORMATION:

Please call the **Telecommunication Service Center at 73800** or send email to: telecom@uamail.albany.edu for immediate assistance.

There is a **minimum of 2 weeks notice** for any work orders.

Fax completed form to extension 73810 or mail to: Office of Telecommunications, Management Service Center, Room 209.

A representative from the Office of Telecommunications will contact you with the date that the work has been scheduled.

For any assistance with your computer please contact your Technology Coordinator (TC).

To find out who your TC is visit... <http://apps.albany.edu/tc/tc.php>