



# TELECOM REQUEST

FOR ETS USE ONLY

Phone    Data    HT    Radio    User

TR #:

1. Date: \_\_\_\_\_ 2. Req. Service Date: \_\_\_\_\_ 3. User Agency #: \_\_\_\_\_

<b>To:</b> <a href="mailto:ETS.NB.TRS@hawaii.gov">ETS.NB.TRS@hawaii.gov</a> <b>DAGS / ETS / NB</b> <b>Kalanimoku Building</b> <b>1151 Punchbowl Street, B20</b> <b>Honolulu, HI 96813</b>	<b>4. Requestor:</b> Name: _____ Title: _____ Phone: _____ Fax: _____ E-Mail: _____
---	---

<b>5. From:</b> Department: _____ Division: _____ Branch: _____	<b>6. Local Contact Person:</b> (If different from requestor) Name: _____ Phone: _____ Fax: _____ E-Mail: _____
--	--

<b>7. Billing:</b> <input type="checkbox"/> Use Existing <input type="checkbox"/> Create New <input type="checkbox"/> Change Account #: _____ Bill Name: _____ Bill Address: _____ City, St, Zip: _____	<b>8. Location of Service:</b> (Service Address) Bldg., & Rm: _____ Address: _____ City, St, Zip: _____ Island: _____	Nearest Working #: _____
---	---	--------------------------

**9. Description: (Attach Quotations, Floor Plans, Brochures, etc. Use additional sheets as required)**  
HATS    VoIP    Cabling    Radio    Other

**10. Justification:**

<b>11. Radio Only - # of radios presently held:</b> _____	<b>12. Vendor:</b> _____
---	--------------------------

**13. Appropriation Code:** \_\_\_\_\_

<b>14. Estimated Costs:</b>	INSTALLATION \$ _____	OTHER \$ _____	TOTAL \$ _____
-----------------------------	-----------------------	----------------	----------------

**15. Departmental Approvals:**

Department Authorization Signature _____	Title _____	Phone _____	Date _____
Department Telecom Coordinator Signature _____	T.C. E-Mail address _____	Phone _____	Date _____

**16. ETS Approvals: (Approval subject to procurement in accordance with Hawaii Revised Statutes)**

Received by ETS/NB

Reviewed by: \_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved by: \_\_\_\_\_  
Signature – Network Branch Manager \_\_\_\_\_ Date \_\_\_\_\_

RETURNED \_\_\_\_\_  
ETS Chief Information Officer (When needed for IT Governance approval) \_\_\_\_\_ Date \_\_\_\_\_

DISAPPROVED    NOTES: \_\_\_\_\_