

SXTV Service Request Form 1

Minor Voice and Data Connection Requests

Return the completed form to SXTV, by fax to 944-0044, or submit the electronic form at <http://sxtvweb/hqtel-e.htm>

For assistance: See **section 1** in the guidebook. For additional information, call 944-1776 (1-2-1)

Contact Information

Div: _____ Location: _____ Floor: _____

Contact Person: _____ Tel: _____ Fax: _____

Service Requested

- Telephone line or SIGNET connection moves, additions or changes for phone, fax, modem, computer and printer connections (section 1.1 in SXTV's guidebook).

Notes: 1. Cost recovery may apply. 2. Subject to SXD Bureau policy on number portability (see "Notes" section at end of SXTV's guidebook *Telecommunications Services for DFAIT Headquarters*).

	From			To			For SXTV Use
	Name	Room	Phone	Jack	Room	Phone	
1							
2							
3							
4							
5							

- Personal Voice Messaging (section 1.2 in SXTV's guidebook)

Employee's name* : _____ Telephone #* : _____

* If same for contact person, enter "same as above".

- Create Delete, no other changes Change as follows:

Move to new telephone # _____ in (Division _____) and delete employee's existing telephone # given above. *Note:* If a mailbox already exists on the new number, SXTV will delete it when making the move.

Effective date: _____

Authorization by Deputy Director

Telephone and SIGNET Connection Moves, Additions, Changes — Deputy Director

Personal Voice Messaging - Bureau Administrator, or designate **except for deletions** which require Director or designate.

Name: _____ Title: _____

Signature: _____ Date: _____