



SPRINGFIELD UTILITY BOARD
 1001 MAIN STREET
 SPRINGFIELD, OR 97477
 PH: 541-726-2395
 FAX: 541-726-2399

DARK FIBER SERVICE CONSTRUCTION REQUEST FORM

DEVELOPMENT INFORMATION

PROJECT/CUSTOMER NAME:

SERVICE ADDRESS #1:

SERVICE ADDRESS #2:

PROPOSED CONSTRUCTION TIME SCHEDULE:

CONTACT INFORMATION

NAME:		COMPANY NAME:	
MAILING ADDRESS:		CITY/STATE:	ZIP:
PHONE:	CELL:	FAX:	E-MAIL:

BILLING INFORMATION (IF DIFFERENT THAN THE CONTACT)

NAME:		COMPANY NAME:	
MAILING ADDRESS:		CITY/STATE:	ZIP:
PHONE:	CELL:	FAX:	E-MAIL:

PROPERTY OWNER CONTACT INFORMATION

NAME:		COMPANY NAME:	PHONE:
MAILING ADDRESS:		CITY/STATE:	ZIP:

DARK FIBER SERVICE INFORMATION

NUMBER OF SINGLE MODE FIBERS: _____	SUB TO PROVIDE DEMARCATION POINT: Y / N	LOCATION	CONNECTOR SYTLE			
			SC	LC	ST	SPLICE
METHOD OF PROCEDURE PROVIDED BY CUSTOMER? Y / N	IF YES: WALL MOUNT [] RACK MOUNT [] 19" OR 21"	#1				
		#2				

REQUIREMENTS

1. A scaled site plan showing the building entry location.
2. Utility-Easements must be signed by the property owner or their representative.
3. Customer provides the building entry and all inside facilities. 50 feet maximum of unprotected cable is allowed inside the building.
4. Inside the building, customer shall follow all applicable building code requirements.
5. A non-refundable Advance Engineering Fee of five-hundred dollars (\$500) is required for preparing a detailed cost estimate. The fee will be credited to the final cost if work is complete within 60 days of the request.
6. **IMPORTANT:** If the above data changes such that the design requires changing, there may be additional costs and a new application will be required.

AGREEMENTS

Customer agrees to pay the actual cost, plus overheads, once the job is complete.

SIGNATURE (Must have signature to process)

SIGNATURE:	DATE:
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