

**DATA CABLING/WIRING SERVICE REQUEST, ADDITIONAL ITEMS**  
 THE UNIVERSITY OF TEXAS AT AUSTIN, INFORMATION TECHNOLOGY SERVICES (ITS)  
 Attach to "Data Wiring Service Request"

DEPARTMENT \_\_\_\_\_ DATE \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ PHONE \_\_\_\_\_ BLDG/ROOM \_\_\_\_\_

**CALL (512) 471-5711 IF YOU HAVE ANY QUESTIONS ABOUT THIS ORDER FORM.**

<b>Item</b>	NEW SERVICE: YES <input type="checkbox"/> NO <input type="checkbox"/>	TYPE OF SERVICE: DISCONNECT <input type="checkbox"/> INSTALL <input type="checkbox"/> MOVE* <input type="checkbox"/> OTHER <input type="checkbox"/>	
CIRCUIT NUMBER _____	BLDG _____	ROOM _____	JACK NUMBER _____
CIRCUIT TYPE: ETHERNET <input type="checkbox"/> FIBER <input type="checkbox"/> MAINFRAME <input type="checkbox"/> OTHER <input type="checkbox"/> Do you want us to provide and install PATCH CORDS? YES <input type="checkbox"/> NO <input type="checkbox"/>			
If including Patch Cords, specify NUMBER/TYPER/LENGTH: (if you do not know what you need, leave blank) _____			
HUB/SWITCH NAME OR NUMBER _____		PORT NUMBER _____	
*MOVE: FROM:	BUILDING _____	ROOM _____	JACK NUMBER _____
TO:	BUILDING _____	ROOM _____	JACK NUMBER _____
Remarks:			

<b>Item</b>	NEW SERVICE: YES <input type="checkbox"/> NO <input type="checkbox"/>	TYPE OF SERVICE: DISCONNECT <input type="checkbox"/> INSTALL <input type="checkbox"/> MOVE* <input type="checkbox"/> OTHER <input type="checkbox"/>	
CIRCUIT NUMBER _____	BLDG _____	ROOM _____	JACK NUMBER _____
CIRCUIT TYPE: ETHERNET <input type="checkbox"/> FIBER <input type="checkbox"/> MAINFRAME <input type="checkbox"/> OTHER <input type="checkbox"/> Do you want us to provide and install PATCH CORDS? YES <input type="checkbox"/> NO <input type="checkbox"/>			
If including Patch Cords, specify NUMBER/TYPER/LENGTH: (if you do not know what you need, leave blank) _____			
HUB/SWITCH NAME OR NUMBER _____		PORT NUMBER _____	
*MOVE: FROM:	BUILDING _____	ROOM _____	JACK NUMBER _____
TO:	BUILDING _____	ROOM _____	JACK NUMBER _____
Remarks:			

<b>Item</b>	NEW SERVICE: YES <input type="checkbox"/> NO <input type="checkbox"/>	TYPE OF SERVICE: DISCONNECT <input type="checkbox"/> INSTALL <input type="checkbox"/> MOVE* <input type="checkbox"/> OTHER <input type="checkbox"/>	
CIRCUIT NUMBER _____	BLDG _____	ROOM _____	JACK NUMBER _____
CIRCUIT TYPE: ETHERNET <input type="checkbox"/> FIBER <input type="checkbox"/> MAINFRAME <input type="checkbox"/> OTHER <input type="checkbox"/> Do you want us to provide and install PATCH CORDS? YES <input type="checkbox"/> NO <input type="checkbox"/>			
If including Patch Cords, specify NUMBER/TYPER/LENGTH: (if you do not know what you need, leave blank) _____			
HUB/SWITCH NAME OR NUMBER _____		PORT NUMBER _____	
*MOVE: FROM:	BUILDING _____	ROOM _____	JACK NUMBER _____
TO:	BUILDING _____	ROOM _____	JACK NUMBER _____
Remarks:			