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| **REQUESTOR INFORMATION:** |
| Company Name: |       |
| Authorised Administrative Contact person: |       | Designation:  |       |
| Contact No. (DID / HP): |       | Email: |       |
| Expected Date of Service:  |       | Note: Job completion is minimally 5 working days turnaround for standard services |

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| **REQUEST TYPE:** |
| **[ ]  New Commissioning** |  **[ ]  Change Request**  | **[ ]  Termination** |
| **SERVICE REQUIREMENT:** (please check where applicable) |
| Data Center[ ]  Connect Hosting Service  Location: Choose a location. Standard Rack (Size: 600x1000) Qty required:        Power Feeds:  16A ­[ ]  1-Phase ­­­­­­ Qty required:       pairs 32A ­[ ]  1-Phase [ ]  3-Phase ­­­­­­ Qty required:       pairs |
| Engage[ ]  Managed Hosted Services [ ]  Basic Managed Security (Please complete form QP06-15) [ ]  Premier Managed Security (Please complete form QP06-14) [ ]  Dedicated Managed Security (Please complete form QP06-13)*[ ]*  Managed Security Change Request (Please complete form QP06-12)*[ ]*  Managed Service (Please complete form QP06-19)[ ]  Business Continuity Suite Services (Please complete form QP06-30)[ ]  Tape Management Services (Please complete form QP06-31) |
| Media[ ]  Media Delivery [ ]  Webcast (Please complete form QP06-33) |
| Connect[ ]  Request host IP Addresses from 1-Net (Please complete form QP06-23)[ ]  Request to host Domain Name Server with 1-Net (Please complete form QP06-25)[ ]  IP Internet Bandwidth(Please complete form QP06-27)[ ]  Cross-Connect/Circuit (Please complete form QP06-32) |
| Special Instructions: |           (Attached additional sheets if required) |
| **Upon receipt of job request, you will be contacted at the number above for verification purposes.****Thank you.** |

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| **FOR 1-NET OFFICIAL USE** |
| **TIX:**       | **Contract ID:**      |
| Date Received:       *[ ]*  Billable *[ ]*  Non-Billable |
| **SERVICE SCOPE REVIEW:** |
| Sales Manager :      Date:      |  | Scope of the service request has been reviewed and verified with customer contract. |