Basic Voice - Service Detailing Form												Form			Total Lines this order:		2	Shee	et:		of:					
	1 110		Cust	omer Name			SK PHA		RMA ENTERPRISE		Serial Number:		Serial Number:			TTCD:										
? Call			-	-	Hunt	T	Ī	Pay-		Existing		Ī	Ot	ther Features	$\equiv$	LU:			Service							
TT dotCom Barrin		ring			Group		F	Phon	ne	Telephone			Hotline			Host:						Site:				
		<u> </u>	_	Details			Details			Detai	ls	Number				11005		LEN:		!	LU I	IDF:				
Bil	Local Number	Change	Bar Incoming	Outgoing RC (refer to table)	Ca Barri Cont Om	ring	Pilot Telephone Number	Line Reversal	In-or-Outside	Coin	Card	(if replacing existing service)	Line Remarks	Value Tone	Exclusive HL	Hot Line B-number	Delayed HL	EL	Group	Level	Vertical	Block	Pair	Circuit Designer External circuit details		
		<u> </u>				ļ		1		ļ	<u> </u>		DL	<u> </u>				<b></b>		!	$\sqcup$					
		<u> </u>						$\perp$	$\perp$				DL					<u> </u>		_ _		$\perp$		1		
		<u> </u>						$\perp$	$\perp$									<u> </u>		_ _		$\perp$		1		
Ш		<u></u>			J					<u> </u>				ļ				L		!						
		<u></u>			J					<u> </u>				ļ				L		!						
		<u></u>			J					<u> </u>				ļ				L		!						
Ш		<u> </u>												<u> </u>				<b></b>		!	Ш					
Ш		<u>L</u>						$\perp$										L		!	Ш					
Ш		<u>L</u>						$\perp$										L		!	Ш					
																		L								
										<u> </u>										!	ĹĹ					
																		<u> </u>								
																		L								
																		<u> </u>								
Ш		<u>L</u>						$\perp$										L			Ш					
																		<u> </u>								
																		<u> </u>								
																		L		!						
PABX / KTS Information:									Ī	Site Works Indicators:						1				Note:						
,	(to be filled if service terminates on a PABX or KT						(TS)			1.	Some lines on this form are REPLACING existing lines (eg TMB) at this si				e				Please use the General Remarks field below,							
Supplier:									4	2.	<u> </u>	Service will connect to CPE which is ALREADY WORKING at this site				· ·				rovide any additional information about						
Contact Name:  Contact Phone:									4	or 3.										works	3					
PABX Type:										or	_	Customer requires TIME Telekom to install NEW Horizontal cable to the CPE							juired at the Customer site.							
PABX Model:									1	or		Customer will arrange with OTHERS to install NEW Horizontal cable to the CPE														
	neral Remarks						ode - R0009 & 07-2721				<u>-</u>		<u> </u>													