

ISSUE TELECOM REQUEST FOR THE ITEMS LISTED BELOW (Form ETS-001)

This form is used by departments and agencies to obtain technical approval from ETS for purchases of telecommunications equipment and services. Telecommunications equipment and services can be purchased using appropriate State procurement procedures, including small purchases or applicable State Procurement Office (SPO) price and vendor list contracts, such as: SPO Price List Contract No. 17-16, SPO Vendor List Contract No. 12-12, NASPO ValuePoint Data Communications Products & Services, and NASPO ValuePoint Public Safety Communication Equipment. Questions should be addressed to the agency's Telecom Coordinator or ETS Network Branch.

The Following Requires ETS Approval:

Telephones:

- a) Adds (install dial tone, jacks & wiring), moves, changes (software, billing), disconnects
- b) Telephone services and equipment, including Hawaii Advanced Telephone System (HATS) single & multi-line phones, ISDN BRI, ISDN PRI phones, conference phones, headsets, TTY's, cordless phones, Key Systems, PBXs, phone accessories and Voice over IP (VoIP) services
- c) Voicemail
- d) CAT5e/6 cabling, jacks, patch panels/blocks, racks, cabinets, etc.
- e) Automatic answering devices, maintenance or lease contracts
- f) Blocking or unblocking long distance dialing
- g) Paging Systems

Radios:

- a) Handheld transceivers (walkie-talkie), portables, mobiles purchase/lease and maintenance agreements
- b) Base stations and repeaters purchase/lease and maintenance agreements
- c) Microwave radio components, purchase/lease and maintenance contracts
- d) Antenna structure components, purchase and maintenance agreements
- e) Relocation of fixed transmitters
- f) Trunked, conventional or simplex radio systems purchase/lease and maintenance agreements
- g) Frequency coordination and FCC licensing services

Video:

- a) Teleconferencing equipment, cable TV

Data:

- a) Telecom equipment including routers, switches, firewalls, CSU/DSU, multiplexers, line drivers, couplers, etc.
- b) Fiber, Cat5e/6, termination panels/blocks, racks, cabinets, etc.
- c) Internet services through Internet Service Providers (ISP)
- d) Purchases from applicable SPO price list or vendor list contracts for Broadband Ethernet services, ISDN PRI, DSL, frame relay, etc.

The Following Does Not Require ETS Approval:

Telephones:

- a) Cellular phones
- b) Pagers

Recorders:

- a) Audio (voice, music), Video (VHS, DVD)

Radios:

- a) AM/FM receivers, shortwave sets, scanners
- b) Hi-Fi equipment, GPS, EPIRB

Video:

- a) Receiver, recorder, camera, closed circuit, amplifier

Data:

- a) Facsimile (Fax)
- b) Patch Cords/Patch Cables (When ordering from Hawaiian Telcom issue a Purchase Order (PO) instead of a TR)

TELECOM REQUEST (TR) INSTRUCTIONS (Form ETS-001)

Submit ETS-001 Form in typewritten format with original or State approved e-sign signatures.

NOTE: Altered ETS-001 Forms submitted to ETS will be returned without action to Requestor.

1. **DATE:** The date that the request is submitted. Format = mm/dd/yyyy.
2. **REQUESTED SERVICE DATE:** Date service is requested to start (no assurances can be given that this date can be accommodated). Format = mm/dd/yyyy.
3. **USER AGENCY #:** Number the user agency or department assigns for its internal tracking.
4. **REQUESTOR:** Name, title, phone, fax and e-mail address of the person responsible for the request.
5. **FROM:** Department, Division, Branch of the agency submitting the request
6. **LOCAL CONTACT PERSON:** (Only if the person is different from the Requestor in Item #4, otherwise leave blank). Name, phone number, fax and e-mail address of the person at the service location. This is an individual that an installer or service provider would contact to gain access to the service location.
7. **BILLING:** (This section MUST be completed for requests to be approved.)
 - a. Using the check-boxes, indicate if the services on this request will:
 - i. **Use Existing** (Service will be billed to an existing account)
 - ii. **Create New** (A new billing account should be created for this service)
 - iii. **Change** (The billing information should be corrected/updated as indicated)
 - b. **Account #:** If vendor is Hawaiian Telcom, indicate the Hawaiian Telcom 15-digit account number to which this service should be billed.
 - c. **Bill Name:** The billing name listed on the account (or) the NEW/ UPDATED name that should be used on the bill. (The bill name should include a reference to the DEPARTMENT, DIVISION, BRANCH & LOCATION where the service is located; especially if bills are mailed to locations OTHER than the service location.) (Example: HSG/LNR/BOATING – HEEIA)
 - d. **Bill Address:** The street address (including room or suite number) or PO Box to which the billing statement should be sent. It's helpful to use street addresses and room numbers to avoid delays that general Department PO Box addresses may cause.
 - e. **City, St, Zip:** The City, State and Zip+4 Code of the billing address.
8. **LOCATION OF SERVICE:** The location where the service is to be installed. Include the street address, building name (or designation), room/unit/suite/cube number, city, state, zip code and select the appropriate island. Include the nearest working telephone number in the box provided.
9. **DESCRIPTION:** Check off the applicable boxes for this request: HATS, VoIP, Cabling, Radio and/or Other. Describe the work to be done. Attach additional sheets, floor plans, quotations and brochures as necessary to describe your request.
10. **JUSTIFICATION:** A narrative providing justification for the request.
11. **RADIO ONLY - # of radios presently held:** Indicate the number of existing radios held by the agency.
12. **VENDOR:** Vendor name fulfilling this request.
13. **APPROPRIATION CODE:** The appropriation symbol(s) (Coding string) that is/are associated with the request. (If additional space is needed, include in the DESCRIPTION or on an additional page.)
14. **ESTIMATED COSTS:** The estimated installation, other, and total costs associated with this request. Attach Quotations, Proposals, Diagrams or Brochures to substantiate these amounts (attach additional sheets as may be required.) Estimates should be within 10% of the actual costs, otherwise Hawaiian Telcom will require the TR to be amended.
15. **DEPARTMENTAL APPROVALS:**
 - a. **Department Authorization Signature:** All Telecom Requests require an approving signature from a Division Head (or official designee). Signature, Title, Phone Number & Date signed are required. Only original or State approved e-signed signatures will be accepted.
 - b. **Department Telecom Coordinator Signature:** All Telecom Requests require an approving signature from the Department's Telecom Coordinator. Signature, E-mail Address, Phone Number & Date signed are required. Only original or State approved e-signed signatures will be accepted. This signature needs to be on file with ETS – Network Branch, otherwise your request will be returned.

