



Master Service Agreement #: _____

Service Term (Months): 36 Months

Customer Information			
Business Name:	Bristol Health		
Billing Address:	935 Orem Blvd		
City:	Orem	State:	UT
Office Phone#:	801-903-5903		
Authorized Person:	_____		
Title:	_____		
Installation Address:	_____		
City:	_____	State:	_____
Zip:	84058		
Mobile Phone#:	_____		

Ethernet Private Line:	Ethernet Port Type:	Bandwidth:	USP	QTY	Unit Cost	MRC	NRC
Ethernet	GigE		Assign New			\$ -	\$ -
A Location:	_____						
Z Location:	_____						

Internet:	Ethernet Port Type:	Bandwidth:	USP	QTY	Unit Cost	MRC	NRC
Ethernet	GigE		Assign New			\$ -	\$ -
IP Address						\$ -	\$ -

Voice Products:	USP	QTY	Unit Cost	MRC	NRC
SIP Type <input type="checkbox"/> PRI <input type="checkbox"/> Analog <input type="checkbox"/> Native				\$ -	\$ -
SIP Type <input type="checkbox"/> PRI <input type="checkbox"/> Analog <input type="checkbox"/> Native				\$ -	\$ -
DID's (PRI & Native SIP)				\$ -	\$ -
Market Expansion Line Service				\$ -	\$ -
Directory Listing (First one included)				\$ -	\$ -
Inter/Intra Long Distance				\$ -	\$ -
Toll Free Numbers				\$ -	\$ -
Toll Free Long Distance (Required with Toll Free)				\$ -	\$ -

Hosted Voice:	USP	QTY	Unit Cost	MRC	NRC
Hosted Service Type	HOSTED ETHERNET SERVICE (\$10/mo)	EN499	5	\$ 10.00	\$ 50.00
Hosted Handset Type	HOSTED HANDSET - Basic (\$8/mo)	EN523	5	\$ 8.00	\$ 40.00
Hosted Handset Type				\$ -	\$ -
Hosted Power Supply (Required without PoE Switch)				\$ -	\$ -
Hosted Communicator				\$ -	\$ -
Hosted 911 (Required with all Hosted Service)	EN 911@ 1.50EA	ENP08	5	\$ 1.50	\$ 7.50
Hosted Voicemail	HOSTED VOICEMAIL (\$2/mo)	ENP03	5	\$ 2.00	\$ 10.00

Additional Services:	USP	QTY	Unit Cost	MRC	NRC
	Assign New			\$ -	\$ -
	Assign New			\$ -	\$ -

Discounts / Promotions	QTY	Unit Cost	MRC	NRC
			\$ -	\$ -

Total	MRC	NRC
	\$ 107.50	\$ -

Directory Listing	Notes:
Business Name: Bristol Health	Port# 801-903-5903/Sold and Installed by Jeremy Roos
Billing Address: 935 Orem Blvd	
City: Orem State: UT Zip: 84058	
Office Phone#: 801-903-5903 Non-Published: Select One	
Vendor Contacts	
Phone System: _____ Company: _____	
Contact Name: _____ Contact Phone: _____	
Contact E-mail: _____	
Network Admin: _____ Company: _____	
Contact Name: _____ Contact Phone: _____	
Contact E-mail: _____	
Network Notification Services:	
E-mail: _____ TXT: _____	

Customer Agreement
 The above named Customer hereby orders the Services shown herein for the costs and term indicated above subject to the terms and conditions of the Master Service Agreement (MSA) between Customer and Central Utah Telephone (CentraCom). The person executing this Service Order hereby swears and warrants by his/her signature affixed hereon that s/he is duly authorized and has the full legal capacity to order said Services on behalf of Customer and to contractually bind Customer to the costs and terms of this Service Order. This Service Order, its attachments and Customer's related MSA and Service Level Agreement (SLA) together comprise the entire agreement of the parties in regard to the Services ordered by Customer under Service Order and there are no other agreements or representations of the parties of any kind that are contingent hereto or that are not expressly stated herein. This Service Order shall become binding only upon written acceptance by an officer of CentraCom authorized to endorse and accept such Service Orders. By executing this Service Order, Customer acknowledges that it has read the attached MSA and SLA and agreed to be bound by the terms and conditions thereof.

Initial Payment/Deposit \$ _____ due _____ upon order.
 Balance of NRC due _____ upon commencement of Services.
 Other (explain below), MRC due upon receipt of invoice.

Customer Signature: _____ **Date:** _____ **Sales Agent:** _____ **Date:** 12/5/2016
Customer Title: _____ **CentraCom Acceptance:** _____ **Date:** _____
Customer E-Mail: _____

For Official Use Only:
Entered By: _____ **Date:** _____ **Account #:** _____ **Service Order #:** _____