Network Services

PO Box 7, 35 South State, Fairview, UT 84629 | (435) 427-3331 | (800) 427-8449



			700-1711			Servic	e Term (Months):		60 M	onthe		
Customer Inform	ation						ic remi (Months).		00 141	JII(113		
Business Name: Level 3 Communications						Authorized Person:						
Billing Address:	12150 Monumen	t Drive RM 700				Title:						
						Installation Address	s: 72 Ft SE c	of EOP of Clive R	d & 432 NE of E	OP of Arag	onite Loc	op Rd
City:	Fairfax	State:	VA	Zip: 220	33	City:	Grantsville	State:	UT	Zip:	840)43
Billing Contact		TEOCO C/G	D LEVEL 3			On Site Contact:		Brad M	agnuson 801-77	5-3380		
Ethernet Private	line:	Ethernet Por	t Type:	Bandwidth:			USP	QTY	Unit Cost	MRC		NRC
	Ethernet		GigE		10	3b		1	\$ 6,005,50		50 \$	
A Location:				d & 432 NE of EOP of								
Z Location:		Viawest Side 572 C	elong Stre	et SLC, UT (LOA/CFA p	provided by	(CentraCom)						
Internet:	Ethernet	Ethernet Por		Bandwidth:			USP	QTY	Unit Cost	MRC		NRC
	P Address		GigE							\$ \$	\$	
Voice Products:	, Madress						USP	OTY	Web each	- UPON THE	* \$	
	□Analog □Native						USP	QTY	Unit Cost	MRC \$	- \$	NRC
SIP Type = PRI	_Analog _Native									s	\$	-
DID's (PRI & Nativ	e SIP)									\$	\$	8
Market Expansion										s	÷ \$	€.
Directory Listing (\$	\$	
Inter/Intra Long D										\$	\$	*
Toll Free Long Dist	ance (Required with T	oli Free)								\$	\$	9
Hosted Voice:	ance (nequired with 1)	on rice)						(ATI)		5	- \$	
Hosted Service Ty	oe .						USP	QTY	Unit Cost	S MRC	- \$	NRC -
Hosted Handset T										\$	- \$	2
Hosted Handset To	/pe									\$. \$	*
Hosted Power Sup	ply (Required without	PoE Switch)								\$	\$	22
Hosted Communic										\$	\$	8
	red with all Hosted Sei	rvice)								s	\$	20
Hosted Voicemail										\$	- \$	
Additional Service	es:						USP	QTY	Unit Cost	MRC	À	NRC
										\$ \$	- \$ - \$	55
Discounts / Prom	otions							QTY	Unit Cost	MRC	7	NRC
								344.1	John Coat	\$	- \$	*
Total										MRC		NRC
	I SNI			1 - 1 A A						\$ 6,005	50 \$	(<u>*</u>)
		Directory Listing	<u> </u>			Notes:						
Business Name:								e Contact at W				
Billing Address:						Requester	вгас d Connector type i	l Magnuson, 80 s SMF with SC (th A and 7	Location	,
City:	ty: State: Zíp:										Location	
Office Phone#:			Non- Pu	ıblished:								
		Vendor Contacts										
Phone System:		Compar	ıy:									
Contact Name:		Contact Phor	ie:									
Contact E-mail:												
Network Admin:		Compar										
Contact Name:		Contact Phor	e:									
Contact E-mail:												
SELVATO	Netw	ork Notification Se	100000									
E-mail:		TXT										
(MSA) between Cus whe is duly authorize This Service Order, i ordered by Customer herein. This Service	stomer hereby orders the tomer and Central Utah T d and has the full legal er is attachments and Custo under Service Order and Order shall become bind mer acknowledges that it ure:	"clephone (CentraCor apacity to order said ! mer's related MSA at I there are no other a ing only upon written	n). The per Services on id Service I greements o acceptance	son executing this Service behalf of Customer and to evel Agreement (SLA) to r representations of the particle.	ce Order her to contractu together cor parties of an	reby swears and warrar ally bind Customer to to norise the entire agreer y kind that are continged zed to endorse and acc terms and conditions d	nts by his/her signature the costs and terms o ment of the parties in ent hereto or that are expt such Service Ord hereof. ales Agent: cceptance:	re affixed hereon f this Service Ord regard to the Ser- not expressly stat	that er. Balan vices co ed Other g this	ce of NRC d immenceme explain belo receipt o	pon orde ue _ ent of Sen	upon vices due upon
For Official Use Only			==		-	4						
Entered By:			Date			Account	H:		Service Order #:			