



# Field Services

## Customer Intake Form

Site Survey - One Talk Installation - Carrier Gateway Installation

networksandcommunications.com | 1-855-9NETCOM

### Before You Start

This form is for your team to complete before your Netcom field visit. Required fields are marked \*. Sections tagged CUSTOMER are completed by you. Sections tagged NETCOM INTERNAL are for Netcom use only. Save the completed PDF and return it to your Netcom Account Manager.

### Field Technician Scope — What to Expect

Netcom technicians handle physical installation, cable runs, mounting, and power connections only. Configuration, porting, firewall changes, and carrier portal access are handled separately. See Step 10 for the full scope breakdown.

## NETCOM ACCOUNT INFORMATION

Account Manager Name	Carrier Rep Name
Netcom Job #	Customer PO / Cost Center
Work Order #	Estimated Visit Date

## 1 What Do You Need From Us?

<b>Netcom Site Survey</b> Cellular enhancement & signal assessment <i>Complete Steps 2-4, 10-14</i>	<b>One Talk Installation</b> Verizon deskphone cabling & mounting <i>Complete Steps 2-7, 9, 10-14</i>	<b>Carrier Gateway Installation</b> Gateway placement & physical management approval <i>Complete Steps 2-8, 10-14</i>
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## 2 Company and Site Information

Company Name \*

Site Address \*

City \* State \* ZIP Code \*

Building Type Number of Floors Year Built / Approx. Age

Suite / Floor / Unit of Installation

Building Ownership

Customer owns the building	Customer leases / rents
Subleasing from another tenant	Co-location / shared facility

## 3 Building & Site Survey Details

Site Survey — Floor Plans

Floor plans are not required to schedule your visit, but they significantly benefit our survey team. Having them available before we arrive helps us plan cable routes, mounting locations, and equipment placement — and reduces day-of surprises. If available, attach to your email or note where they can be retrieved.

Roof Access

Roof access is available and permitted	Roof access requires landlord / building approval
Roof access is not available	Roof access not applicable for this project

Roof Type Roof Access Method (hatch, stairs, elevator, ladder)

Exterior Mounting Permissions

Required if service includes exterior antennas, enclosures, or cable penetrations through the building envelope.

Exterior mounting is permitted — no approval needed	Exterior mounting requires landlord / building approval
Exterior mounting is not permitted at this site	Not applicable — all equipment is interior

Exterior mounting restrictions or notes (location, penetration limits, aesthetics, etc.)

Cellular Signal Environment

Good outdoor signal, weak indoors	Weak signal throughout building
Known dead zones on specific floors	Signal varies by floor
Currently using cellular backup	No cellular signal at this location
Unknown	

Describe known signal issues or dead zones (floor, area, carrier)

Carriers Currently Used at This Site

Verizon	T-Mobile / Sprint
AT&T	FirstNet (AT&T first responder network)
US Cellular	Dish / Boost Mobile
Other carrier (specify below)	No cellular currently in use

Other Carrier Name Carrier Account Number

FirstNet Requirements

FirstNet is a hard requirement for this site	FirstNet preferred but not required
First responder / public safety use case	Government / municipal customer
Healthcare / hospital environment	Not applicable

FirstNet use case or additional context

Floor Plan / Site Layout

Floor plan attached to this email	Floor plan available — will send separately
No floor plan available	Tech should sketch layout during site visit

Floor plan notes / key areas / zones of interest / number of floors covered

## 4 Contacts

Primary Company Contact

Full Name \* Title or Role

Phone \* Email \*

On-Site Contact (day of visit)

Same as primary contact

On-Site Name \* On-Site Phone \*

On-Site Email

Escalation & Decision Authority

This contact can authorize scope changes, approve access exceptions, or make on-site decisions if the primary contact is unavailable.

Full Name \* Title / Role \* Phone \*

Email Authorization Level

Esc. Full site authority; IT decisions only; Emergency only

Backup Contact

Name Phone

Carrier Rep (if involved)

Rep Name Title Phone

Rep Email

## 5 Site Access and Logistics

Site Risk Classification

<b>Low Risk</b> Standard office. No special PPE, escorts, or permits required.	<b>Medium Risk</b> Restricted access, badge required, elevated or outdoor work.	<b>High Risk</b> Hazmat, confined space, rooftop work, or COI required.
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Business Hours After-Hours Contact Number

Parking and Vehicle Instructions

Entry Instructions (codes, check-in procedures, etc.)

Site Characteristics (check all that apply)

Office / commercial space	After-hours access required
Public-facing area	Loading dock access
Manufacturing floor	Badge / key card required
Warehouse environment	Escort required at all times
Freight elevator needed	Certificate of Insurance (COI) required
Gated / secured access	Outdoor / rooftop work

## 6 Existing Infrastructure & Network

On-Site Availability (check all that apply)

Server room / IT closet	Accessible power outlet near install location
Roof access available	Existing internet equipment on site
Ethernet drop at install location	Conduit or cable tray available
UPS / battery backup	Not sure

IT Closet / Equipment Room Location

Approx. distance: equip. room to install location Ceiling Type

Existing Internet Equipment (brand / model) Current WAN / ISP Provider

Internet Usage Profile (check all that apply)

Primary internet connection	Backup / failover only
WAN bonding / load balancing	POS / payment terminals
VoIP / phone system	Security cameras / NVR
IoT / connected devices	SD-WAN deployment
Guest Wi-Fi	Video surveillance upload
Remote monitoring / SCADA	Other

Estimated number of users / devices Required bandwidth (if known)

Additional usage or technical notes

## 7 Network Handoff

This section documents the physical network handoff point. Firewall and switch configuration is handled by your IT team.

Existing Firewall or Router (brand / model) Available Port (WAN, LAN, SFP, RJ45)

VLAN ID Approx. distance: install location to network switch IP or DHCP for WAN

Handoff method

IT team manages handoff	Hand off to on-site staff
Details provided day-of	Not sure

## 8 Carrier Gateway Installation

Skip this section if your service does not include a Carrier Gateway Installation.

Has the carrier shipped the device(s) to the site?

Yes — device is on site No — not yet shipped Not sure

Device IMEI / Serial	Install Location	Power Source	Mounting Method

Cabling

Ethernet cable already in place	New cable run required
Run exceeds 100ft	Not sure

## 9 One Talk Phone Installation

Skip this section if your service does not include a One Talk Phone Installation.

Device Counts

Desktops	Conference Phones	Headsets	Phones to Remove
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User / Ext.	Phone Model	Location / Desk	Power Source

Cabling

Ethernet cable already in place	New cable run required
Run exceeds 100ft	Not sure

Power

Standard wall outlet available	PoE switch available
PoE injector needed	Power to be confirmed day-of

Mounting

Desktop placement	Wall mount	Undetermined
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Pre-Install Readiness

One Talk lines already provisioned	Device MAC addresses available
Network credentials available	Existing phones to be removed
Customer IT notified	Building access confirmed

Additional installation notes

## 10 Field Technician Scope & Responsibilities

What we deliver on site

- Physical installation, mounting & termination
- Cable runs per Statement of Work
- Power connections per Statement of Work
- Clean handoff to IT team
- Full site survey documentation & photos

Routed to specialists

- Device configuration & provisioning
- Phone number porting (carrier-managed)
- Carrier portal access (customer admins only)
- Firewall / switch changes (customer IT team)
- Troubleshooting existing systems
- Anything outside the Statement of Work

By signing Step 14, the customer acknowledges and agrees to the scope of work described above.

## 11 Safety and Compliance

Hard hat required	High-visibility vest required
Steel-toe boots required	Background check required
Drug test required	Safety training / orientation
Constant of contact required	No-photo area
Certificate of Insurance (COI)	Fall protection required
Confined space awareness	Hazmat area

Additional hazards or PPE requirements

## 12 Scheduling

Primary preferred date / time window \*

Alternate window Blackout periods (dates to avoid)

Required advance notice Estimated visit duration (if known)

Scheduling constraints

After-hours only	Weekends only
Business hours OK	24/7 access available
Maintenance window required	Multiple visit days likely

Pre-Arrival Notification

Let us know if you need advance notice before our technician arrives. We will contact the number or method you specify below.

Call 30 minutes before arrival	Text 30 minutes before arrival
Call 1 hour before arrival	No notification needed

Pre-arrival notification contact (if different from primary contact)

Day-of Check-In Requirements

Check-in instructions (security desk, reception, gate code, etc.)

Check-in contact name Check-in contact phone

Check-in type

Report to front desk / reception	Call on-site contact upon arrival
Use keypad / access code	Badge or visitor pass required
Sign in at security	No check-in required

## 13 Additional Notes and Attachments

General notes / special requirements

Attachments included (list file names)

## 14 Sign-Off

By completing this form and providing your name below, you confirm the information is accurate and that you have reviewed the Field Technician Scope of Work in Step 10.

Full Name \* Title or Role

Email Address \* Date \*

Signature — type your full legal name

Next Steps

1. Save this completed PDF (File - Save As)
2. Email it to your Netcom Account Manager
3. Netcom will review, confirm scope, and contact you to schedule the visit

## NETCOM USE ONLY — Internal Sign-Off

Complete after customer form is received — do not distribute to customer

This section is for Netcom internal use. Complete after reviewing the customer-submitted form. Do not share this section with the customer.

AM Review Date Scheduled Visit Date Estimated Labor Hours

Netcom Job # (confirmed) Assigned Technician(s)

Scope confirmed and SOW issued COI received Dispatch order sent

Internal notes / scope deviations

Account Manager Sign-Off Date