The purpose of this questionnaire is to gather as much information as possible at the beginning of the space planning process. The first part of this questionnaire helps the user establish their space requirements. It should serve as a guide for the user group in determining space requirements for new space, altering/re-configuring and/or adding to existing space.

The second part of this questionnaire will also help the real estate/procurement personnel in obtaining the best possible space to lease for all new requirements. Some of the requested technical information (which will not apply in all procurements) can be obtained from the manufacturer or supplier of the related item (i.e. BTU’s, floor load, weight). This form is designed to print out and fill in by hand.

If you have any questions or desire assistance in completing any portion of this form, contact the Real Estate Contracting Officer (RECO) named below.

**NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PART I - SPACE REQUIREMENTS**

**SECTION A: ORGANIZATIONAL ANALYSIS**

1. Organizational Information

* Provide general orientation of the organization and the function of your group. A walk-through will be required.

* Identify any additional requirements relevant to the space requirement for and space planning of your group.

* Identify any deficiencies in your current space.

* Clearly establish adjacencies within your group and in the organization as a whole.

2. ORGANIZATIONAL SPACE DATA REQUIREMENTS

(Note: If written information is available on any of these areas, please submit.)

1. Organizational Charts
   1. Current organizational charts.
2. Staff List for personnel to be housed in the renovated space.
   1. Existing and projected personnel including last name; first initial; position/title; grade level and status (FT, PT, intern, shift, contractor, etc.)
3. Adjacency Requirements
   1. Critical
   2. Important
   3. Convenient
   4. No adjacency required
4. Identify SUPPORT AREA facilities as desired, or required, to be provided in the Department and indicate your requirements for those facilities (See attached questionnaire).
   1. Shared workstations
   2. Shared work areas
   3. Reception area
   4. Storage area/room
   5. Filing area/room
   6. Library
   7. Team/Conference rooms (departmental use only)
   8. Computer/ADP room
   9. Mail area
   10. Copy area
   11. Supply area
   12. Coffee station
   13. Coats

3. ORGANIZATIONAL CRITERIA

1. Function
   1. Teams
2. Aesthetics
3. Degree of flexibility
   1. Moveable walls
   2. Systems furniture
   3. Modular furniture
4. Open/closed offices
5. Other

4. WORKSPACE REQUIREMEMTS

1. Workspace Categories
   1. Functional needs
      1. Private/enclosed offices (PO)
      2. Semi-private offices (SPO)
      3. Partial-height partitioned workstations (PHWS)
      4. Workstations (WS)
      5. Open areas, Shared/Support area – no enclosures (O)
2. Workstation Requirements
   1. Worksurfaces
   2. Storage
   3. Display surfaces
   4. Accessories
   5. Lighting
   6. Acoustical treatment
   7. Special requirements
   8. Other

**SECTION B: PROGRAMMING QUESTIONS**

A. Private Offices/Workstations

|  |  |
| --- | --- |
| 1. Workspace | Privacy required? \_\_\_\_\_Full?\_\_\_ Partial? \_\_\_\_\_\_ Conference required? \_\_\_\_\_\_\_\_Seating \_\_\_\_\_\_\_\_ Visitor chair? \_\_\_\_\_\_ Quantity \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Acoustics required? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Would you like writing and tackable surface? \_\_ Would you need tools and accessories? \_\_\_\_\_\_\_\_\_ Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 2. Filing | What type of filing do you have? Letter \_\_\_\_\_\_\_\_\_ Legal. \_\_\_\_\_\_\_Linear footage\* (letter)\_\_\_\_\_\_\_\_\_\_\_ Linear footage\*(legal) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ File types – lateral/vertical/X2s? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Automated or retrieval filing units? \_\_\_\_\_ Quantity \_\_ |
| 3. Storage | Any books/binders? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Provide linear footage.\* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Can current books/binders be collocated in shared reference area? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 4. Miscellaneous | Do you utilize a computer, printer, fax machine or modem? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Provide sizes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Do you require dedicated and/or secured phone and fax lines? \_\_\_\_\_\_Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**\*** Please type all responses. Linear footage calculation is actual linear dimension of items. This will be discussed during the programming meeting, if needed.

B: Shared/Support Areas

|  |  |
| --- | --- |
| 1. Shared Workstations | How many? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  What are their functions? \_\_\_\_\_\_\_\_\_\_\_\_ For use by Interns? \_\_\_\_\_ How many? \_\_\_\_\_\_  For use by Contractors? \_\_\_\_ How many? \_\_\_ For equipment use? \_\_\_\_\_ Fax? \_\_\_\_\_\_\_\_\_\_\_ Scanner? \_\_\_\_\_ Desk top Laser printers? \_\_\_ How many? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Staplers? \_\_ Hole puncher? \_\_ Paper cutter? |
| 2. Shared Work Areas | Team Area? \_\_\_\_\_\_\_\_ Type? \_\_\_\_\_\_\_\_\_\_\_\_\_ Who needs access? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How many? \_\_\_\_\_\_\_ Display? \_\_\_\_\_\_\_\_\_\_\_ For equipment use? \_\_\_\_\_ Type? \_\_\_\_\_\_\_\_\_ How many? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Storage required? \_\_\_\_\_Type?\_\_\_\_\_\_\_\_\_\_\_\_ Conference? \_\_\_\_\_\_\_\_\_\_ Seating? \_\_\_\_\_\_\_ |
| 3. Reception Area | Sofa? \_\_\_\_\_\_\_\_\_\_\_\_\_\_How many?\_\_\_\_\_\_\_\_ Side chair?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How many?\_\_\_\_\_\_ End tables? \_\_\_ Coffee table? \_\_\_\_ Lamps?\_\_\_\_\_ |
| 4. Storage | Size? \_\_\_\_\_\_\_\_ How many? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Who needs access? \_\_\_\_\_\_\_\_\_\_\_\_ Use frequency? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Binders?\_\_\_\_\_\_Manuals? \_\_\_\_\_\_\_ Types \_ Books? \_\_\_\_\_\_Sizes. \_\_\_\_\_\_\_\_\_. Linear feet. |
| 5. Filing | Size? \_\_\_\_\_\_\_\_\_\_\_\_\_ How many? \_\_\_\_\_\_\_\_ Who needs access? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Legal or Letter size? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Linear Feet**\*** (letter)\_\_\_\_\_\_ Linear Feet**\*** (legal) Any secured filing? \_\_\_\_\_\_\_ Linear feet. \_\_\_\_ Top or side tabs? \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 6. Library | Square footage required? \_\_\_\_\_\_\_\_\_\_\_\_\_ Reference tables? \_\_\_\_\_\_\_\_\_\_ How many \_\_ Linear feet of reference material \_\_\_\_\_\_\_\_\_ Books? \_\_\_\_\_\_\_ Oversized?\_\_\_\_\_\_Standard? Conference required?\_\_\_\_\_ Seating \_\_\_\_\_\_\_ |
| 7. Conference Rooms | Size \_\_\_\_\_\_\_\_ Seating \_\_\_\_\_\_ How many?\_\_ Teleconference?\_\_\_\_\_\_\_\_ Audio/Visuals \_\_\_\_ Types?\_\_\_\_\_\_\_\_ Overhead Projector \_\_\_\_\_\_\_ ProjectionScreen?\_\_\_\_Size?\_\_\_Mechanism\_\_ Electrical requirement \_\_\_\_\_\_\_\_\_ Amps \_\_\_\_\_ Blackout curtains? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Acoustics?\_\_\_\_\_\_ |
| 8. Computer/ADP Room | Size \_\_\_\_\_\_ How many? \_\_\_ Location \_\_\_\_\_\_ # of workstations \_\_\_\_\_ Supplemental A/C? \_\_\_\_\_\_\_\_\_\_\_ Capacity \_\_ Storage? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Electrical requirement \_\_\_\_\_Amps\_\_\_\_\_\_\_\_\_\_ Equipment? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Flooring? \_\_\_\_\_\_\_\_\_\_ Security \_\_\_\_\_\_\_\_\_\_\_\_ Location/Adjacency? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 9. Mail Stations | How many? \_\_\_\_\_\_\_ Personnel Count?\_\_\_\_ Who needs access? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Size of mail? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Slots or boxes\_\_\_\_\_\_\_\_\_\_ Quantity? \_\_\_\_ Sorting area required? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Storage required? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 10. Copy Area | Media size?\_\_\_\_\_ Boxes or Pallettes \_\_\_\_\_\_ Quantity? \_\_\_\_\_\_\_. How often? \_\_\_\_\_\_\_\_\_ Sorting area? \_\_\_\_\_\_\_ Storage area? \_\_\_\_\_ |
| 11. Supply Area | Who needs access? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Secured? \_\_\_\_\_\_\_\_\_\_\_\_\_ How many? \_\_\_\_ Supply types. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Shelves or X2s? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supply cabinets? \_\_\_\_\_\_\_ Secured? \_\_\_\_\_\_\_ |
| 12. Coffee Station | Who needs access?\_\_\_\_\_ Refrigerator? \_\_\_\_ Coffee machine?\_\_\_\_\_\_ Microwave? \_\_\_\_\_ Quantity of each type \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ H2O storage? \_\_\_\_\_ Quantity \_\_\_\_\_\_\_\_\_\_ |
| 13. Coats | Locations \_\_\_\_\_\_\_\_\_ How many? \_\_\_\_ |

 \* Linear footage calculation is actual linear dimension of items. This will be discussed during the programming meeting, if needed.

C: Equipment

|  |  |
| --- | --- |
| 1. Computer Areas | Any shared desk top publishing units? \_\_\_\_ Qty \_\_\_\_ Information access terminals? \_\_\_\_\_\_Qty \_\_\_ Who needs access? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dimensions? \_\_\_\_\_\_\_\_ Desk or tower CPU? \_\_\_ |
| 2. Microfiche Units | Are they required? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Qty.\_\_\_ Who needs access? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Need storage for microfiche? \_\_\_\_\_\_\_\_\_\_\_ Size of microfiche. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 3. Scanners | Who needs access? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Qty \_\_ Is a computer attached or needed? \_\_\_\_\_\_\_\_\_ Is a printer attached or needed? \_\_\_\_\_\_\_\_\_\_\_ Size of scanner. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 4. Fax machines | Who needs access?\_\_\_\_\_\_\_\_\_\_\_\_ Qty \_\_\_\_ Who monitors? \_\_\_\_\_\_\_\_\_ Dimensions \_\_\_\_\_ Do any need secured lines? \_\_\_\_\_\_\_\_\_\_\_\_\_ Storage requirements for paper? \_\_\_\_\_\_\_\_\_\_ |
| 5. Laser printers | Desk top or freestanding w/ bases and high output models? \_\_\_\_ Amps or Voltage \_\_\_\_\_\_ Dedicated outlets? \_Special outlets?\_\_\_\_\_\_\_\_ Type? \_\_\_\_\_\_ Dimensions \_\_\_\_\_\_\_\_\_\_ Specify by manufacturer. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Storage for paper and toner required? \_\_\_\_\_\_ |
| 6. Copiers | Manufacturer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Qty \_\_\_ Amperes or Voltage \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dedicated outlets? \_\_\_ Special outlets?\_\_\_\_\_ Type? \_\_\_\_\_\_\_\_ Dimensions \_\_\_\_\_\_\_\_\_\_\_\_ Air circulation vents location. \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 7. Shredders | Assigned to whom? \_\_\_\_\_\_\_\_\_ Quantity \_\_\_\_ Manufacturer \_\_\_\_\_\_\_\_ Dimensions \_\_\_\_\_\_\_\_ Dedicated outlets \_\_\_\_\_ Amps or Voltage \_\_\_ Special outlets \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**PART II: REQUIREMENTS FOR NEW SPACE (LEASED)**

**Section A: General**

1. REQUIREMENT LOCATION (CITY/STATE):  
  
2. ON OR OFF AIRPORT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. DELINEATED AREA if off airport (the area in which you must locate--use streets as boundaries). Your Real Estate Contracting Officer can assist you in developing your delineated area.

4. Required Occupancy Date:

5. Is Future Expansion Anticipated? \_\_\_\_ When? \_\_\_\_ How Much? \_\_\_\_

6. Is Future Downsizing Anticipated? \_\_\_\_ When? \_\_\_\_ How Much? \_\_\_

7. Maximum Lease Term: ( ) 5 Years ( ) 10 Years ( ) Other (Specify)

8. TOTAL NUMBER OF OCCUPANTS: \_\_\_\_\_\_\_\_

9. A STAFFING PLAN IS REQUIRED

9a.Plan is attached \_\_\_\_\_\_ Plan will be submitted by (date) \_\_\_\_\_\_\_\_\_

9b. Gender Breakdown (needed to determine toilet facility requirements).

Male

Female

9c. Is there a second or third shift? ( ) Yes ( ) No  
  
9ca. If Yes, please identify the number of employees on each shift:

9d. Will multiple occupancy work stations be used? ( ) Yes ( ) No

**Section B: Location Within Building**

1. Must your space be located on a particular floor? If so why?
2. Must your space be located on one floor only? If so why?   
   (applies to large blocks of pace)
3. Must your space be located in one contiguous block without being split by a public corridor? (applies to large blocks of space) If so why?
4. Must your space be on contiguous floors only? If so why?  
   (applies to large blocks of space)
5. In multi-FAA tenant buildings, identify other Divisions you must be located near and explain why:

**Section C: Parking/Transportation**

1. How many parking spaces will be required for official use vehicles?  
   (Parking for employees is not authorized except as required by local codes).
2. Is "reserved" signage required? ( ) Yes ( ) No
3. Is fenced or secured parking required? ( ) Yes ( ) No
4. Is bus service required? ( ) Yes ( ) No
5. If Yes, how close to the nearest bus stop? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Will a loading dock be required? ( ) Yes ( ) No
7. What size trucks will it have to accommodate? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Will a freight elevator be required? ( ) Yes ( ) No
9. Briefly describe warehouse operation requiring loading dock & freight elevator.   
       
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section D. Services And Utilities**

1. What are your normal hours of operation?(i.e. 10/11 hours, days, weekends, etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Is daytime janitorial required: ( ) Yes ( ) No
3. Will overtime access and utilities be required? ( ) Yes ( ) No  
   If Yes, what frequency?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section E. Firesafety**

1. Do you have any special fire safety requirements? ( ) Yes ( ) No  
   If Yes, outline below. If more space is needed, attach a separate sheet:  
       
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
     
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section F. Security**

List special security requirements (if any) such as location within building, slab to slab walls, vaults, special guard requirements, special locks\*, internal locks, alarm systems, security cameras, card access, etc.:

**Section G. Telecommunications**

(A copy of this form will be forwarded to telecommunication specialist by the Real Estate Contracting Officer.)

Local Telecommunications Point of Contact:

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_

Alternate:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_

1. Location of FAA Telco Room If Known (Room and/or floor):\_\_\_\_\_\_\_\_\_\_\_\_
2. 2. Are you expanding at your existing location (acquiring additional space) or are you relocating to a new location?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: Telecommunications encompasses both voice and data requirements. To more accurately access your total needs, we need to capture separately below. Line and equipment information are needed for both voice and data.

VOICE (Lines)

|  |  |
| --- | --- |
| Existing: | New: |
| Number of lines used in your phone system? \_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Number of Lines used outside your phone system? \_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Special Features required on your lines (Call Forwarding-Variable, etc.)? \_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Remarks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

VOICE (Equipment)

|  |  |
| --- | --- |
| Existing: | New: |
| What kind of phone system do you have (key system, PBX, etc.)? \_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Manufacturer (Comdial, ICSS, etc.)? \_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Current Number of Instruments? \_\_\_\_\_\_ Single-Line ? \_\_\_\_\_\_\_\_\_\_\_\_\_  Multi-Line ?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Speakerphones ?\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you have a Voice Mail System? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ (If yes, how many lines support it) \_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are you aware of any Regional or National programs being implemented that may affect your current provisioning? For example, staffing increases.  Remarks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

DATA (Lines)

|  |  |
| --- | --- |
| Existing: | New: |
| Do you have ADTN2000 Access? \_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Is it dial-up or dedicated?\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you have modem lines?\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| How many?\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| How are they used? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| (What applications are they used for or what computer systems/Hosts you access) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you have a LAN?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are all users connected to the LAN?\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you have fax lines?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| How many?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you share lines between machines? (Does a computer and fax share dialtone) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Remarks:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

DATA (Equipment)

|  |  |
| --- | --- |
| Existing: | New: |
| Any equipment onsite providing dedicated ADTN2000 access? (Routers, CSU/DSU,UPS etc.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| If so, rack mounted or floor space used?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Modem Equipment?\_\_\_\_\_\_\_\_\_\_\_ What speeds? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are modems on individual PC’s or "pooled"?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you currently fax via machine or PC?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you have users with portable equipment that use dialup access to other offices or applications?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Remarks:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Are you aware of any Regional or National programs that may affect your current provisioning? For example, are you aware of applications that currently are desktop but are planned for remote access or higher speeds? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

-Other Telecommunications Issues-

1. Any requirement for pay phone access?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Any telecommunications required related to Safety? (Fire Alarm circuit, Voice Calls from Elevator, etc.)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_