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| ***Replace this text carrier name – company code (e.g. CLEC – 1234)*** | | | | | | **Altafiber’s (9348)** simplified **LSR/RESALE** form. Email completed form to [clecorders@altafiber.com](mailto:clecorders@altafiber.com) Ver 03/20/24  Check PON Status at <https://services1.altafiber.com/CarrierPreOrder/> M-F 8-5 EST | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |
| **ADMINISTRATIVE**  **SECTION** | **CCNA** | | **PON** | | | | | VER | ATN - existing/old TN or new TN if ACT=N | | | **DTSENT** | | | |
|  | |  | | | | |  |  | | |  | | | |
| **DDD (Desired Due Date)** | | **SUP** | REQTYP | ACT – New, Change, Disc, T-Move, V-convert as spec, W–convert as is | | | | | | | | | CC | | NNSP |
|  | |  | EB |  | | | | | | | | |  | |  |
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| **BILL**  **SECTION** | **BAN1** | | | | BILL NAME & ADDRESS (Street, Floor/Room, City, State, Zip), BILL CONTACT NAME & NUMBER | | | | | | | | | | |
| **513-111-????, ???** | | | |  | | | | | | | | | | |
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| CONTACTSECTION | **INIT** | | | | | | **TEL NO** | | | **EMAIL***(altafiber prefers a shared/group email address for responses)* | | | | FAX NO | |
|  | | | | | |  | | |  | | | |  | |
| **IMPCON (Supervisor)** | | | | | | **TEL NO** | | | **EMAIL** | | | | **FAX NO** | |
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| **END USER INFORMATION** | **NAME** | | | | SAPR | **SANO** | SASF | **SASD** |
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| **SASN** | | | | | | **SATH** | | SASS |
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| SADLO | | | | | | **FLOOR** | **ROOM** | **BLDG** |
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| **RESALE**  **SERVICE** | | **NPI** | **LNA** | **LTOS** | **TNS - New TN if LNA=X** | | | ***FPI*** | | ***PIC*** | ***LPIC*** | ***BA*** | | ***BLOCK*** | | | ***BA*** | ***BLOCK*** |
|  |  | **2BF-** |  | | |  | |  |  |  | |  | | |  |  |
| FA | FEATURE | FEATURE DETAIL | | | | FA | FEATURE | | FEATURE DETAIL | | | | FA | | FEATURE | FEATURE DETAIL | | |
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| **LISTING SECTION** | **LACT** | **RTY** | LTY 1-Listed, 3-NP | **TOA** | LNLN | LNFN |
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| REMARKS | TN Confirmation Number: S |