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| --- | --- | --- | --- | --- |
| **DCC Gateway Connection Ordering Request**  **RDP Only**  **Please note that there is a separate form for SEC Party requests.**  Please use a separate form for each Gateway Connection Request. Fields with Asterisk (\*) are mandatory values. | | | | |
| **RDP request for DCC Gateway Connection** | | | | |
| R1\* | | Date of Request: | DCC Connection Reference (to be completed by DCC) | |
| R2 | | RDP Reference | | |
| **SECTION One – RDP Information** | | | | |
| R3\* | | RDP Name | R4\* | RDP Signifier |
| R5\* | | Signifiers of Network Parties on whose behalf this request is being raised:  : | | |
| **SECTION Two – Contact Information (person submitting the form)** | | | | |
| R6\* | | Contact Name  (Title, First, Last): | R7\* | Contact Email  Address: |
| R8\* | | Contact Telephone No: | R9 | Contact Role: |
| **SECTION Three – Installation Site Details** | | | | |
| R10\* | | Name and address of Installation Site  (including postcode): |  | |
| R11\* | | Is this your Primary or Backup Line? Primary  Backup | | |
| **SECTION Four – Low Volume Bandwidth Details** | | | | |
| R12\* | | Is a new telephone line required? Yes  No  If a new line is **not** required, please provide the telephone number of the line to be used: | | |
| **SECTION Five – Connection Installation Details** | | | | |
| R13\* | Select the minimum term of the connection: 1 year  3 years | | | |
| R14\* | When can the installation be carried out? Tick only **one** box  **Monday to Friday** (09:00 – 17:00)  **Weekdays** (Out of Hours)  **Weekends** | | | |
| R15 | Provide any other relevant information about your requirement | | | |
| **SECTION Six – Connection Performance Reporting** | | | | |
| R16\* | | Would you like to receive monthly performance reports for this connection?): Yes  No | | |
| **SECTION Seven – AUTHORISED SIGNATURE** | | | | |
| R17\*  I understand this is a request for obtaining information from DCC on feasibility of a single DCC Gateway Connection at a site.  This will provide a quotation which is valid for 30 days.  Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Complete the form, scan and email to [servicedesk@smartdcc.co.uk](mailto:servicedesk@smartdcc.co.uk). If you would prefer to upload this form to a secure area within DCC, please contact the Service Desk for it to be arranged.  If you have any queries, please ring the Service Desk on 0844 225 4445 | | | | |

Guidance Notes

| **Field No.** | | **Field Name** | **Mandatory** | **Notes** |
| --- | --- | --- | --- | --- |
| R1\* | Date of Request | | Yes | * This is the date you submit the form to the DCC. |
| R2 | RDP Reference | | No | * Your reference for this request |
| R3\* | RDP Name | | Yes | * This is the name of the RDP requesting the connection |
| R4\* | RDP Signifier | | Yes | * This is the RDP’s Signifier |
| R5\* | Network Party Signifiers | | Yes | * These are the Party Signifiers of the Network Parties that will use the connection |
| R6\* | Contact Name | | Yes | * This should be the name of the person submitting the form |
| R7\* | Contact Email  Address | | Yes | * This should be the email address of the person submitting the form |
| R8\* | Contact Telephone No: | | Yes | * This should be the contact number of the person submitting the form |
| R9\* | Contact Role: | | Yes | * This should be the role of the person submitting the form |
| R10\* | Installation Site Details: | | Yes | * The full address and site details for the location where the installation will take place |
| R11\* | Primary or Backup | | Yes | * Will this connection be your primary or backup line? |
| R12\* | Telephone Line | | Yes | * Please specify whether the connection requires a new telephone line or whether it will use an existing one, in which case please specify the number |
| R13\* | Connection term | | Yes | * This is the term duration for the connection. This will be either 1 or 3 years. We will assume 3 years unless otherwise specified |
| R14\* | Installation Times | | Yes | * This provides options for the installation work and when this can be carried out |
| R15 | Other Relevant Information | | No | * Please let us know any other relevant information relating to your request |
| R16\* | Performance Report | | Yes | * Please specify whether you would like to receive performance reports on this connection |