

# Networking and Telecommunications Communications Room Equipment Installation Agreement

Version 3.4 (revision March, 2023)

It is agreed that \_\_\_\_\_ (Department/College/Unit, hereinafter "Department") may install equipment into the communication room, operated and managed by Networking and Telecommunications, as described below provided that:

- 1) The equipment is rack mounted specifically where arranged with Networking and Telecommunications.
  
- 2) It is agreed that this is on a "space available" basis. Networking and Telecommunications reserves the right to reclaim the rack space provided the Department is given a minimum of 30 day notice.
  
- 3) The equipment and cables to the equipment are installed according to Networking and Telecommunications' Standards, e.g., cables are routed and supported properly, tied into bundles, dressed properly, of proper color, length and type, etc.
  
- 4) Equipment will be clearly and neatly labeled on the front with:
  - *Contact name*
  - *Contact phone number*
  - *Contact e-mail address*

*(It is recommended that these not be individuals as individuals change, but rather site central support contacts.)*

Note: Access to the communication room is provided for separately, see contacts here:

<http://www.telecom.colostate.edu/communications-rooms.aspx>

(over)

**Equipment Description:**

Building and room#: \_\_\_\_\_

Number of rack space units needed: \_\_\_\_\_

Number of power connections: \_\_\_\_\_

Type of power connections: 110 or 208? \_\_\_\_\_

Description of equipment/project: \_\_\_\_\_

**Site - Central Support Contact Information:**

Contact Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

**Charges:**

There is no charge for this service. However, current service fees may apply to address issues with equipment that is not properly cabled, maintained, mounted or kept in accordance with ACNS/Telecommunications Design standards. (Fees and standards listed at telecom.colostate.edu.)

**Signatures:**

**College/Department/Unit Director:**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Manager of Networking and Telecommunications:**

Signature \_\_\_\_\_ Date \_\_\_\_\_