HINES Telecom Access Form

Date: C	Company Performing Work
Time In: P	Person Performing Work
	ID #:
Time Out: S	upervisor Name
Phone:	
Circle Building where work is being pe	erformed: One Shell Plaza 811 Louisiana
Tenant work is being done for:	
Tenant Phone #:	
Person(s) that requested circuit:	
List all communication companies invo	olved with circuit:
Description of Work:	
If the work performed is telecommunic 1. What type of circuit is involved a. [] Single or Mult b. [] T-1 c. [] DS3 or greater d. [] Miscellaneous	ti DS0 Circuit.
Manager's Approval:(T-1 or greater)	