Division 10

Logistics and Supply

Chapter 06 – Telephone Installation

January 2009

POLICY

This General Order shall ensure that telephone installations, relocations, and removals are coordinated through the Fire/EMS Operations Center.

DEFINITIONS

N/A

PROCEDURES

1. General Provisions

Fire/EMS Station

All Fire/EMS stations will be approved for three telephone lines, per facility. No facsimile lines will be installed in any Fire/EMS station.

Fire/EMS Office

All offices will be charged for any work other than routine maintenance.

2. Repair/Work Requests

All Fire/EMS offices must request additional telephone service, lines and/or equipment in writing or by email through the Fire/EMS Operations Center. This request will be made by the office manager or his/her designee.

The following information shall be included on the request:

• Office name and address where is to be performed

- Name and telephone number of contact person
- Specific location for installation of new equipment
- Detailed justification for why the new equipment is necessary

Approval

Once the Fire/EMS Operations Center has received a telephone request:

- The Fire/EMS Operations Center will complete a Prince George's Telephone Request, Form 1047
- Upon completion, the Form 1047 shall be forwarded to the Manager at Logistics and Supply for funding approval
- Once funding has been approved, the telephone request will be forwarded to OITC/ Communications Division

Installation Time

Installation time is determined by how many jobs are ahead of your request.

REFERENCES

N/A

FORMS/ATTACHMENTS

Prince George's County Telephone Request (Form 1047)

PRINCE GEORGE'S COUNTY TELEPHONE REQUEST				
Please complete this form in full.				
TO: OITC/Communications I 7911 Anchor Street Landover, Maryland 207 New Address:			FROM: ((INCLUDE PRESENT ADDRESS)
			Directory Listing Information:	
Name, location & telephone no. of persons to contact:				
Description of Work:				
Justification:				MANDATORY:
				<u>MANDATORY:</u> Funds are available for this work order under:
				FUND ACCOUNT CENTER
				Billing address should be:
The articles or services requested are necessary to properly conduct the			ne	Billing contact name and telephone number:
activities of this agency and have been provided for in the budget.			_	<u>Circle type of line requested:</u> POTS Line CENTREX Line
Signature of record Date FOR USE BY COMMUNICATIONS OFFICE				
Work Order No.	Due Date	Date Issued		Request returned for the following reason(s):
REMARKS				
DATE COMPLETED		<u>Distribution:</u> Communications: Three Copies Department: One Copy		SIGNATURE: