
This request form has code embedded into it and is intended to be filled out in Adobe Acrobat from top to bottom and left to right in sequential order.

Page 2

This page is the main page for requesting access to AT&T structure records and must be filled out for all information requests.

The drop downs located in the first row (request type, type of structure records, and state) must be completed prior to completing any other sections of the form. These drop downs drive the information required to be completed prior to submitting the application. Additional fields and notes will be made available based on the selections made.

Page 3

This page is intentionally left blank unless the request is for an “in person” records review. If your request is for an in person record review, you must complete the fields listed on page 3 and submit the upfront payment along with your request.

Page 4

This page is intentionally left blank unless the request is for pole or conduit maps/max grade information in California or Nevada. If the request is for either pole max grade information or conduit maps, page 4 will be made available to provide detailed instructions on how and where to submit the request.



Is a Letter of Authorization on file with AT&T for Requester?

If NO, please complete the [Letter of Authorization for Applications, Record Review, Billing & Notices \(LOA\)](#) available on the [Structure Access 21 State page of CLEC Online](#) and submit it with this request.



Is a Non-Disclosure Agreement on file with AT&T for the Applicant Company?

If NO, a Non-Disclosure Agreement will be provided and must be executed prior to the proposed viewing date.

Applicant requests AT&T to allow Applicant Representative to view the appropriate Structure Records for the area indicated on the enclosed map and data sheet(s) for ____ hours (minimum is 2 hours) on the following proposed viewing dates:

• Proposed Viewing Date #1 _____ from _____ to _____
mm/dd/yyyy hr:min hr:min

• Proposed Viewing Date #2 _____ from _____ to _____
mm/dd/yyyy hr:min hr:min

Applicant Contact (Viewer) Information

Contact Name: _____
Contact Company Name: _____
Applicant Address, Street: _____
City, State, Zip Code: _____
Telephone #: _____
Email: _____

Billing Party Information

Contact Name: _____
Applicant Company Name: _____
Billing Address, Street: _____
City, State, Zip Code: _____
Telephone #: _____
Email: _____

A deposit of _____ (\$124 per hour x number of hours requested) has been sent to the remittance address listed below (Please write the Applicant Tracking Number on the check memo or other form of payment):

REMITTANCE ADDRESS

All billing costs for any of the above work will be based on the terms included in the current Structure Access Agreement between Applicant and AT&T.

ATT Info

AT&T Tracking #: _____ Records Review Complete: _____ at _____
mm/dd/yyyy hr:min



Information Access Request - Structure Records