

## Information Access Request - Structure Records

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APPLICANT INFO

Applicant (Company Name)		
License/SA Agreement or LSB#		_
Applicant Tracking Number:		_
In accordance with the terms and conditions of the S	itructure Access Agro	eement noted above, application is
hereby made to obtain structure records information	n from AT&T in the c	ity of
county of in the state of		
Applicant requests AT&T to allow Licensee Representa indicated on the enclosed map and data sheet(s) for _viewing dates:		
Proposed Viewing Date #1  mm/dd/yyyy	from	to
Proposed Viewing Date #2  mm/dd/yyyy	from	to
Applicant Contact (Viewer) Information Contact Name: Contact Company Name: Applicant 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):		
All billing costs for any of the above work will be based on the to IMPORTANT: In order to process your request, all necessary dracannot be sent electronically, pleas contact you Structure Access geographic area for which the facilities are required. Please do all records request require a minimum of 5 business days notice.	awings and/or maps mus as Regional Point of Conta not send request forms of	t be attached to this form and sent electronically. If they act. Applicant must identify, with reasonable specificity, the
By signing this request the Applicant agrees to follow the guide	lines defined in the curre	ent Structure Access Agreement.
Signature: Printed N	ame:	Date:
NOTICE: AT&T records provided under this Information Request may not reflect actual field conditions. Licensee acknowledges that physical inspection is necessary to verify presence and condition of outside plant facilities and that in providing record information, AT&T assumes no liability to Licensee or any third party for errors/omissions contained therein.		

Records Review Complete: \_