



# LSR Order Samples

New Business Private Line

REQTYP: KB

ACT: N

Product: Resale Private Line - Install New

Field	Description	Field Entry
<b>Local Service Request Form (LSR)</b>		
CCNA	Customer Carrier Name Abbreviation	<ZTK>
PON	Purchase Order Number	<Your PON>
VER	Version Identification	<01>
LOCQTY	Location Quantity	<001>
ATN	Account Telephone Number	<N>
D/TSENT	Date and Time Sent	<200901150800>
DDD	Desired Due Date	<20090117>
REQTYP	Request Type	<KB> (Resale Private Line)
ACT	Activity	<N>
AGAUTH	Agency Authorization Status	Y (Authorization on File)
LSO	Local Serving Office	<260492>
TOS	Type of Service	<1DM-->
NC	Network Channel Code	<HCER>
NCI	Network Channel Interface Code	<04DU9.1SN>
INIT	Initiator Identification	<Joe Smith>
TEL NO	Initiator Telephone Number	<8135555400>
FAX NO	Facsimile Number	<8132279044>
IMPCON	Implementation Contact	<Mary Williams>
TEL NO	Telephone Number	<8134383000>
REMARKS	Remarks	<Installing Private Line>
<b>End User Form (EU)</b>		
LOCNUM	Location Number	<001>
NAME	End User Name	<Best Food Shop>
AFT	Address Format Type	<N>
SANO	Service Address Number	<46>
SASN	Service Address Street Name	<Cayuga>
SATH	Service Address Street Type	<Rd>
CITY	City	<Anytown>
STATE	State	<IN>
ZIP	Zip/Postal Code	<33510>
LCON	Local Contact	Jane Doe
TEL NO	Local Contact Telephone Number	<8135551212>
<b>Resale Private Line Form - Primary Location</b>		
LIT	Location Identification Type	<E>
LOCNUM	Location Number	<001>
PRILOC	Primary Location	<Best Food Shop>
AFT	Address Format Type	<N>
SANO	Service Address Number	<46>
SASN	Service Address Street Name	<Cayuga>
SATH	Street Address Street Type	<St>
CITY	City	<Anytown>
STATE	State	<IN>
ZIP	Zip/Postal Code	<33511>
RLSO	Resale Local Service Office	<260492>
<b>Resale Private Line Form - Secondary Location</b>		
LIT	Location Identification Type	<E>

Product: Resale Private Line - Install New

Field	Description	Field Entry
LOCNUM	Location Number	<002>
SECLOC	Secondary Location	<XYZ Co>
AFT	Address Format Type	<N>
SANO	Street Address Number	<131>
SASN	Street Address Street Name	<Main>
SATH	Street Address Street Type	<St>
CITY	City	<Anytown>
STATE	State	<IN>
ZIP	Zip/Postal Code	<33511>
RLSO	Resale Local Service Office	<260492>
LCON	Local Contact	<J R Smalling>
ACTEL NO	Local Contact	<8133950687>
ACC	Access Information	<See JR on the 1st Floor>
<b>Resale Private Line Form - Primary Location - Details</b>		
LOCNUM	Location Number	<001>
LNUM	Line Number	<00001>
LNA	Line Activity	<N>
FA	Feature Activity	<N>
FEATURE	Feature Codes	<Private Line Service & Equipment>
FA	Feature Activity	<N>
FEATURE	Feature Codes	<Private Line Termination Service & Equipment>
<b>Resale Private Line Form - Secondary Location - Details</b>		
LOCNUM	Location Number	<002>
LNUM	Line Number	<00001>
LNA	Line Activity	<N>
FA	Feature Activity	<N>
FEATURE	Feature Codes	<Private Line Termination Service & Equipment>
FA	Feature Activity	<N>
FEATURE	Feature Codes	<Private Line Signalling (if applicable)>

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