

3. Electric Power			
Type of Current	Voltage	Watts	Location
Enclosure of equipment space: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Description (if "Yes")			
C. Identify any required usage of third-party access to building:			
D. Owner authorizes Licensee to negotiate with AT&T for access as described above: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Signature (required):			
E. Licensee agrees to pay for the foregoing licenses:			
	One-time Amount (\$)	Monthly Amount (\$)	
<input type="checkbox"/> One-time charge			
<input type="checkbox"/> Monthly charge			
<input type="checkbox"/> N/A			
F. Licensee elects to: (check one)			
<input type="checkbox"/> Obtain required insurance			
<input type="checkbox"/> Self-insured			
<input type="checkbox"/> N/A			
Licensee Company Name		AT&T	
_____ Authorized Representative		_____ Authorized Representative	
_____ Name (Typed/Printed)		_____ Name (Typed/Printed)	
_____ Date		_____ Date	
Owner			
_____ Authorized Representative			
_____ Name (Typed/Printed)			
_____ Date			

Attachment(s): Yes No