



Interconnection Services Wireless Service Center Service Order Accuracy Review/Access

(3 requests per month)

SR Name	Supervisor Initials	Rep Initials	Date Covered
Request/Order #1	Date Received		

	Yes	No	Comments
Screen ASR	<input type="checkbox"/>	<input type="checkbox"/>	
CSPS Original dates Met (SID)	<input type="checkbox"/>	<input type="checkbox"/>	
ACNA/CCNA	<input type="checkbox"/>	<input type="checkbox"/>	
TA/CN	<input type="checkbox"/>	<input type="checkbox"/>	
PON	<input type="checkbox"/>	<input type="checkbox"/>	
FOC	<input type="checkbox"/>	<input type="checkbox"/>	
APP DATE	<input type="checkbox"/>	<input type="checkbox"/>	
ICNTS Notes	<input type="checkbox"/>	<input type="checkbox"/>	
Due Date Changes/Charge (appropriate miss / code/change TA)	<input type="checkbox"/>	<input type="checkbox"/>	
Related Order FID (RO,CRO,SEQS)	<input type="checkbox"/>	<input type="checkbox"/>	
PRN/FRN	<input type="checkbox"/>	<input type="checkbox"/>	
CLARIFICATION (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Expedite/Cancellation Charges	<input type="checkbox"/>	<input type="checkbox"/>	
Rating			

Interconnection Services Wireless Service Center Service Order Accuracy Review/Access

(3 requests per month)

SR Name	Supervisor Initials	Rep Initials	Date Covered
Request/Order #2	Date Received		

	Yes	No	Comments
Screen ASR	<input type="checkbox"/>	<input type="checkbox"/>	
CSPS Original dates Met (SID)	<input type="checkbox"/>	<input type="checkbox"/>	
ACNA/CCNA	<input type="checkbox"/>	<input type="checkbox"/>	
TA/CN	<input type="checkbox"/>	<input type="checkbox"/>	
PON	<input type="checkbox"/>	<input type="checkbox"/>	
FOC	<input type="checkbox"/>	<input type="checkbox"/>	
APP DATE	<input type="checkbox"/>	<input type="checkbox"/>	
ICNTS Notes	<input type="checkbox"/>	<input type="checkbox"/>	
Due Date Changes/Charge (appropriate miss / code/change TA)	<input type="checkbox"/>	<input type="checkbox"/>	
Related Order FID (RO,CRO,SEQS)	<input type="checkbox"/>	<input type="checkbox"/>	
PRN/FRN	<input type="checkbox"/>	<input type="checkbox"/>	
CLARIFICATION (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Expedite/Cancellation Charges	<input type="checkbox"/>	<input type="checkbox"/>	
Rating			

Interconnection Services Wireless Service Center Service Order Accuracy Review/Access

(3 requests per month)

SR Name	Supervisor Initials	Rep Initials	Date Covered
Request/Order #3	Date Received		

	Yes	No	Comments
Screen ASR	<input type="checkbox"/>	<input type="checkbox"/>	
CSPS Original dates Met (SID)	<input type="checkbox"/>	<input type="checkbox"/>	
ACNA/CCNA	<input type="checkbox"/>	<input type="checkbox"/>	
TA/CN	<input type="checkbox"/>	<input type="checkbox"/>	
PON	<input type="checkbox"/>	<input type="checkbox"/>	
FOC	<input type="checkbox"/>	<input type="checkbox"/>	
APP DATE	<input type="checkbox"/>	<input type="checkbox"/>	
ICNTS Notes	<input type="checkbox"/>	<input type="checkbox"/>	
Due Date Changes/Charge (appropriate miss / code/change TA)	<input type="checkbox"/>	<input type="checkbox"/>	
Related Order FID (RO,CRO,SEQS)	<input type="checkbox"/>	<input type="checkbox"/>	
PRN/FRN	<input type="checkbox"/>	<input type="checkbox"/>	
CLARIFICATION (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Expedite/Cancellation Charges	<input type="checkbox"/>	<input type="checkbox"/>	
Rating			