

Customer Configuration Change Request Form

Customer ID:

It is critically important that you should provide us with the information we need, otherwise your service date may be delayed. Upon receipt of this form, the request will be processed in next business day's office hour (09:00 ~ 16:30).

Administrative / Technical Contact				
Company		-		
Name				
Contact Number				
☐ Static route modification				
□ Network parameter / Routing protocol modification				
☐ One to one mapping (NAT) / NAT reconfiguration				
□ QoS / CoS modification				
□ Access control modification				
☐ ManagedCONNECT access password modification				
□ Others				
Location / Site ID: Target Completion Date:				
Details / Remarks (use separate sheet if necessary):				
Customer Declaration			CITIC Telecom CPC use only	
For and on behalf of		(company name)		
Accepted and confirmed by				
The second secon				
Authorized signature with cor	npany stamp	Date	Done by	Date
_	parry scarrip	Date	Done by	Dutc
Name:				
COMPANY CONFIDENTIAL		Page 1 of 1	Forr	m#: CS/CIF-4-1/9A14

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