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| Send Completed Applications to: | [**AVCommittees@portseattle.org**](mailto:AVCommittees@portseattle.org) | Received by F&I: | Click or tap to enter a date. |

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| **SECTION 1** *(to be completed by POS Project Manager)* | | | | | | | | | | | | | | | | | | |
| **1.1: Acknowledgement, Infrastructure Nomenclature, and COMM Connection Process:** | | | | | | | | | | | | | | | | | | |
|  | I have reviewed the Application for Connection to Communication System Instructions (Periodically check for updated information and support) | | | | | | | | | | | |  | | I am using the current Application version  [For your convenience, below link is to all applications and instructions]  ([Applications for Utilities Connections | Port of Seattle (portseattle.org)](https://www.portseattle.org/page/applications-utilities-connections) | | | |
| YES | NO | | N/A | | REQUESTED | | **COMM Infrastructure Connections\***- I have media termination assignment(s) and nomenclature from ICT Infrastructure ([z-it-telecom-infra@portseattle.org](mailto:z-it-telecom-infra@portseattle.org)) (**\*) Required no later than 90% and inc. on design** | | | | | | | | | | | |
|  |  | |  | |  | |
| YES | NO | | N/A | | UNKNOWN | | Project shall require an **Application for Connection to Special Systems**. Review the Special Systems Application or the [(Special Systems Matrix\_2023.xlsx (sharepoint.com)](https://portseattle.sharepoint.com/:x:/r/sites/SPOC/_layouts/15/Doc.aspx?sourcedoc=%7BAE504CD2-F4BE-45C0-834C-EA4D93E7F31F%7D&file=Special%20Systems%20Matrix_2023.xlsx&action=default&mobileredirect=true) for more information | | | | | | | | | | | |
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| **1.2 Project Coding:** | | | | | | | | | | | | | | | | | | |
| **Submittal Date:** | | | | | | **CIP #:** | | | | **Project ID:** | | | | | **Activity:** | | | **Phase:** |
| Click or tap to enter a date. | | | | | | Click or tap here to enter text. | | | | Click or tap here to enter text. | | | | | Click or tap here to enter text. | | | Choose an item. |
| **1.3: Project includes Communication Infrastructure involving (check all that apply):** | | | | | | | | | | | | | | | | | | |
|  | New Facility (Including expansion of existing facility) | | | | | | | | | |  | | | Airline Support (PLB, Ticket Counter, Gate Service, Lounge, etc.) | | | | |
|  | Remodel to existing Facility | | | | | | | | | |  | | | Office space(s) (distribution of Horizontal Cabling) | | | | |
|  | New Communication Room(s) | | | | | | | | | |  | | | Existing Infrastructure Adds, Moves, and/or Changes (to Rooms, Pathways, and/or Cabling) | | | | |
|  | New Comm Cabinet(s) (MDC, SDC, FTBS, Tenant DMARC) | | | | | | | | | |  | | | Auxiliary building(s) or space(s) outside of SEA Terminal | | | | |
|  | Outside Plant (Pathways, Enclosures, and/or Cable) | | | | | | | | | |  | | | Special System(s) -Requires an Application for Connection to Special Systems to be completed | | | | |
|  | Other: | | | Click or tap here to enter text. | | | | | | | | | | | | | | |
| **1.4: Connection Specifics:** | | | | | | | | | | | | | | | | | | |
| **COMM CONNECTION TYPE:** | | | | | | | | | Choose an item. | | | | | | | | | |
| **TO COMM RM:** | | | | Choose an item. | | | | | | | | | | | *or* ***COMM CABINET:*** | Click or tap here to enter text. | | |
| **Additional Project Notes:**  (Brief notes to provide any comm connection details not captured above) | | | | | | | | | | Click or tap here to enter text. | | | | | | | | |
| **1.5: Project Contacts:** | | | | | | | | | | | | | | | | | | |
| Group: | | Company: | | | | | | Representative: | | | | | | | Phone: | | Email: | |
| SEA PM: | | Port of Seattle | | | | | | Click or tap here to enter text. | | | | | | | Click or tap here to enter text. | | Click or tap here to enter text. | |
| Design Firm: | | Click or tap here to enter text. | | | | | | Click or tap here to enter text. | | | | | | | Click or tap here to enter text. | | Click or tap here to enter text. | |
| COMM Design Engineer: | | Click or tap here to enter text. | | | | | | Click or tap here to enter text. | | | | | | | Click or tap here to enter text. | | Click or tap here to enter text. | |
| Tenant Rep.: | | Click or tap here to enter text. | | | | | | Click or tap here to enter text. | | | | | | | Click or tap here to enter text. | | Click or tap here to enter text. | |
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| **SECTION 2** *(to be completed by Communications Design Engineer)* | | | | | | | |
| **2.1: Acknowledgement:** | | | | | | | |
|  | I have reviewed the applicable sections of the F&I SEA COMMUNICATION STANDARDS related to this project’s communication design. \*Periodically check for updated information: [Design Standards and Guidelines | Port of Seattle (portseattle.org)](https://www.portseattle.org/page/design-standards-and-guidelines) | | | | |  | Comm Design Engineer has been coordinating with Architectural, Electrical, Mechanical, and Civil teams for projects where applicable; especially on those that include new/remodeled comm spaces |
| **2.2: Project Design Questionnaire:** | | | | | | | |
| YES | NO | N/A | See Notes | Design Engineer has provided design documentation for the following  (**BOLD**= Minimum design documentation to provide with Application applicable to design) | | Complete if “See Notes” box is selected | |
|  |  |  |  | **SEA Facility CAD Backgrounds**  (Include any Outside Plant, building floor and/or RCP Plans, etc. Provide detail of all Backbone and Horizontal pathways with cable fill amounts from Source to Destination | | Click or tap here to enter text. | |
|  |  |  |  | **One-line** and/or **Riser diagram(s)** | | Click or tap here to enter text. | |
|  |  |  |  | **Cable Schedules**  (Shall include all Cable ID’s and the Source and Destination termination assignment per cable) | | Click or tap here to enter text. | |
|  |  |  |  | Comm infrastructure that supports any Airport **Special Systems** (Coordinate w/ PM per section 1.1 and 1.3) | | Click or tap here to enter text. | |
|  |  |  |  | Tenant Demarcation package(s) | | Click or tap here to enter text. | |
|  |  |  |  | Comm Room Plans  (Include floor, RCP, wall field, and rack/cabinet elevations) | | Click or tap here to enter text. | |
|  |  |  |  | Demolition of infrastructure (Equipment, pathways, and/or cabling) | | Click or tap here to enter text. | |
| Additional information (optional): | | | | | Click or tap here to enter text. | | |

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| **SECTION 3: APPLICATION STATUS** *(to be completed by Facilities and Infrastructure Communication Engineer)* | | | | | | | | | | | | | | | | | | | | | |
|  | **3.1: Application compliance checklist:** | | | | | | | | | | | | | | | | | | | |  |
| YES | NO | | N/A | See Notes | | | | Confirm Items: | | | | | Completed if “See Notes” box is selected | | | | | | |
|  |  | |  |  | | | | Eligible for Expedited Review(s) | | | | | Click or tap here to enter text. | | | | | | |
|  |  | |  |  | | | | Design includes termination data | | | | | Click or tap here to enter text. | | | | | | |
|  |  | |  |  | | | | Design includes nomenclature data | | | | | Click or tap here to enter text. | | | | | | |
|  |  | |  |  | | | | COMM Design drawings included | | | | | Click or tap here to enter text. | | | | | | |
| **3.2: Application Status:** | | | | | | | | | | | | | | | | | | | |
|  | **Approved** | | | |  |  | **Approved as Noted** (see below) | | | | | |  |  | **Revise and Resubmit** |  |  | **Rejected** | |
| **Notes:** | | Click or tap here to enter text. | | | | | | | | | | | | | | | | | |
| **Attend Telecom Design Review at:** | | | | | 30% | | | 60% | 90% | 100% | Other: | | | | | 1st Application Received at %: | | | Choose an item. |
|  | | |  |  |  |  | Click or tap here to enter text. | | | |
| *Facilities and Infrastructure Communication Reviewer:* | | | | | | | | | | | | | | | | | | *Date:* | |
|  | | | | | | | | | | | | | | | | | | Click or tap to enter a date. | |
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