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| Send Completed Applications to: | **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) (**\*) 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/%3Ax%3A/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 |
|[ ] [ ] [ ] [ ]   |
| **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. |
| **Project Title:** | Click or tap here to enter text. |
| **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. |  |
|  |  |  |