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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:** |
|[ ]  I have completed an Application for Connection for connection to COMMUNICATION INFRASTRUCTURE  |[ ]  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)  |
|[ ]  This Special System(s) connects to EXISTING Comm Infrastructure and an Application for Connection to COMMUNICATION INFRASTRUCTURE does not apply |[ ]  I have reviewed the Application for Connection to Special Systems Instructions (Periodically check for updated information and support) |
| **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 Special Systems Hardware and/or Applications involving (check all that apply):** *NOTE: For further details of below list, including vendors and system owners, please reference:* [*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) |
|[ ]  800 MHz Radio |[ ]  Access Control System (ACS) |[ ]  Airport Breach/Duress System |
|[ ]  Bag Carousel Information Displays |[ ]  Baggage Keypad System |[ ]  BioMetric Air Exit System |
|[ ]  Border Entry (APC) System |[ ]  **Cable Television** (complete Section 1.5) |[ ]  Cellular Distributed Antenna System |
|[ ]  Carbon Monoxide Monitoring System |[ ]  Common Use Terminal Equip. (CUTE) |[ ]  Common Use Self-Service (CUSS) |
|[ ]  Electric Ground Support Equip. (EGSE) |[ ]  Fire Alarm System (FAS) |[ ]  Flight Information Displays (FIDS) |
|[ ]  GPS Fleet Tracking -Rental Car Bus Wait Time |[ ]  Intercom Systems |[ ]  Intelligent Transportation System (ITS) Roadway Digital Signage |
|[ ]  Parking Revenue Control System |[ ]  Passenger Flow System | - | *Future System (placeholder)* |
|[ ]  Perimeter Intrusion Detection Sys. (PIDS) |[ ]  POS/SEA Digital Displays |[ ]  Power Monitoring System (EMS) |
|[ ]  **Radio Frequency -Inc. FCC Licensed Systems** (complete Section 1.6) |[ ]  Surface Area Mgmt. System (SAMS) |[ ]  Satellite Transit System Communications Display |
|[ ]  Supervisory Control and Data Acquisition (SCADA) |[ ]  Terminal Wide Voice Paging (TWVPS) | - | *Future System (placeholder)* |
|[ ]  Time to Train System (STS Train Display) |[ ]  Vendor Electronic Displays |[ ]  Video Management System (VMS) |
|[ ]  Visual Docking Guidance Sys. (Safe Dock) |[ ]  Smart Bathroom (1 year Pilot) | - | *Future System (placeholder)* |
|[ ]  SYSTEM(s) -OTHER or NEW(Or additional notes opportunity) | Click or tap here to enter text. |
| **1.4: 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. |
| Systems 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. |
| **Attn. Project Manager: Seek Project Design Engineer and/or SEA Tenant support as necessary to complete these sections** | **1.5: Cable Television Service Details:** (if not applicable, skip to section 1.6) |
|  | Project Name or Tenant Space ID: | Click or tap here to enter text. | Demarcation Panel ID: | Click or tap here to enter text. |
|  | Total number of displays: | #? | *Demarcation to display horizontal coax is:* | Home run to each display |[ ]  RG-6 or greater |[ ]  Installed by owner |[ ]
|  | *Television Owner/ Tenant Operator* | Company: | Contact Person: | Phone: | Email: |
|  |  | 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. |
|  |  | Street Address: | City: | State: | Zip Code: |
|  |  | 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. |
|  | Any additional contacts to note? (Not listed in section 1.4) Include Project Role, Company, Rep., Phone, and Email per contact: |
|  | Click or tap here to enter text. |
|  | **1.6: Radio Frequency Systems- Including systems requiring FCC License:** (if not applicable, skip to Section 2) |
|  | *RF Service Type:* |[ ]  Cellular |[ ]  Data |[ ]  VHF |[ ]  UHF |[ ]  Wi-Fi |[ ]  Broadcast TV antenna  |[ ]  Other (add notes below) |
|  |  | RF Service Notes: | Click or tap here to enter text. |
|  | NOTE: Wi-Fi Systems for SEA Tenant shall be installed to keep strongest signal within leased footprint. Do NOT use SEA Airport reserved channels of 1, 6, and 11 |
|  | Wi-Fi MAC address: | Click or tap here to enter text. | Radio type (802.11a, b, or g): | Click or tap here to enter text. |
|  | *Antenna Install Date Tracking:* | Proposed START: | Click or tap to enter a date. | Proposed Completion: | Click or tap to enter a date. | Proposed Cut-over (if req.): | Click or tap to enter a date. |
|  | *Antenna Location(s) Tracking:* | Amt: | Longitude: | Latitude: | Height: | Frequency Range: |
|  |  | 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. | Click or tap here to enter text. |
|  | *Antenna Owner/ Operator* | Company: | Contact Person: | Phone: | Email: |
|  |  | 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. |
|  |  | Street Address: | City: | State: | Zip Code: |
|  |  | 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. |
|  | Complete items below for FCC licensed antenna systems |
|  | *FCC Applicant*  | Company: | Contact Person: | Phone: | Email: |
|  |  | 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. |
|  |  | Street Address: | City: | State: | Zip Code: |
|  |  | 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. |
|  | FCC Approval Date (per Frequency): | Click or tap here to enter text. |
|  | Approval End Date (per Frequency): | Click or tap here to enter text. |
|  | Frequency Range: | Click or tap here to enter text. | Output Power: | Click or tap here to enter text. |
|  | FCC License Type  |[ ]  Permanent |[ ]  Temporary | Copy of FCC License submitted: |[ ]  Yes |[ ]  No |
|  | Any additional contacts to note? (Not listed in section 1.4) Include Project Role, Company, Rep., Phone, and Email per contact: |
|  | 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/Special Systems Design Engineer(s) have been coordinating with Architectural, Electrical, Mechanical, and Civil teams for projects where applicable; especially on those that include new/remodeled comm rooms |
| **2.2: Project Design Questionnaire:** |
| YES | NO | N/A | See Notes | Design Engineer has provided design documentation for the following | Complete if “See Notes” box is selected |
|[ ] [ ] [ ] [ ]  **SEA Facility CAD Backgrounds** (Include any Outside Plant, building floor, RCP Plans, etc. that detail Special System hardware) | Click or tap here to enter text. |
|[ ] [ ] [ ] [ ]  **One-line, System Schematics,** and/or **Riser diagram(s)** | Click or tap here to enter text. |
|[ ] [ ] [ ] [ ]  **Elevation Plans** (Including wall field, and rack/cabinet elevations. Provide any details where Special Systems Hardware is to be mounted or installed)  | Click or tap here to enter text. |
|[ ] [ ] [ ] [ ]  **Radio Frequency Plans** (Including FCC License Submittals and antenna mounting details) | 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. |  |
|  |[ ] [ ] [ ] [ ]  Associated *Application for Connection to Comm. Infrastructure* completed | Click or tap here to enter text. |  |
|  |[ ] [ ] [ ] [ ]  COMM Design drawings included  | Click or tap here to enter text. |  |
|  |[ ] [ ] [ ] [ ]  Includes Utility and/or Licensed Connection (see 1.5 and/or 1.6) | 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 Special Systems 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. |  |
|  |  |  |