

TELECOMMUNICATIONS SERVICE REQUEST (TSR)

DATE OF REQUEST	DATE TO BE COMPLETED BY	PRIORITY <input type="checkbox"/> YES <input type="checkbox"/> NO	PRIORITY JUSTIFICATION (IF YES)					
UNIT NAME			NAME AND TELEPHONE NUMBER OF REQUESTOR					
VIA:			<p>1. Detailed instructions for completing a TSR can be found at the TSD website: http://www.lejeune.marines.mil/OfficesStaff/telephone/tsr.aspx or by calling the Customer Support Section at 451-2531/3100.</p> <p>2. Requests to Move, Add or Change (MAC) service must include a building diagram that clearly identifies the location of the service requested to include jack numbers.</p> <p>3. The TSR must be submitted 45 days prior to the required service activation date, except for urgent mission driven command and control requirements. Completed TSRs can be sent to MCB_CAMLEJ_TSR@usmc.mil.</p> <p>4. To submit a customer comment card, please visit our ICE web link at: https://ice.disa.mil/index.cfm?fa=card&sp=11069&s=113&dep=*DoD&sc=2</p>					
TO: COMMANDING GENERAL, MCIEAST-MCB CAMLEJ ATTN: G-6, TELECOMMUNICATIONS SUPPORT DIVISION PSC BOX 20005 CAMP LEJEUNE, NC 28542								
ATTN:								
TELECOM WORK DETAILS AND COMPLETE JUSTIFICATION:								
USER INFO (NAME)				PHONE#		E-MAIL		
PRESENT LOCATION OF EQUIPMENT (BLDG#/RM#/PORT#)					PRESENT DIRECTORY LISTING (UNIT/ BILLET TITLE)			
PROPOSED LOCATION OF EQUIPMENT (BLDG#/RM#/PORT#)					PROPOSED DIRECTORY LISTING (UNIT/ BILLET TITLE)			
AUTHORIZING SIGNATURE						DATE SIGNED		
DO NOT WRITE-----TSD OFFICIAL USE ONLY-----BELOW THIS LINE								
WORK ORDER #							TSR#	
REQUEST APPROVED BY			INVESTIGATIVE TIME		DATE INVESTIGATED	CAT	DUE DATE <input type="checkbox"/> ON <input type="checkbox"/> BY	
FOR INVESTIGATOR USE ONLY								
IN	TERMINAL	LOCATION	CA	PAIR	LUG	X-CONN	BLDG	CKT-DESIG
OUT								