



Designated Agency Representative - DAR Authorization Form

Type of Request (Mark One (X))

New Modify Delete

DAR Information

First Name M.I. Last Name

Title

DAR's Organization/Unit

Telephone: Voice - - FAX - -

Email Address:

Preferred Method of Receiving Service Request Acknowledgments, Service Order Notifications, and Service Order Completion Notices?

(Mark One (X)): E-mail FAX US Mail

DAR Supervisor Information

First Name M.I. Last Name

DAR's Supervisor's Title

Mailing Address Information

Organization Mailstop/Office Symbol

Street

City State Zip Code

Agency Bureau Code(s) Represented by DAR:

Types of Service DAR Authorized to Place Orders (Mark All that Apply (X)):

Circuit Switched Service: Switched Voice Service Toll Free Service 900 Service Circuit Switched Data Service
Switched Data Service: Packet Switched Service Internet Protocol Service Frame Relay Service ATM Service
Dedicated Transmission Service: Dedicated Transmission Service
Value Added Service: PCS MNS, MPNS, MSS, IVPN, DAF, HOSTING, COLOCATION AND VIDEO

Does DAR have Expedite Authority? Yes No

Does DAR have DAR Administrator Authority? Yes No

The DAR is responsible for ensuring that sufficient funding is available for all requested service(s) prior to the submission of each service request to the contractor(s) providing the above services and/or equipment. The transmission of any service and/or equipment request to the contractor(s) indicates certification of funding availability.

Person Completing this form

Telephone Number

Authorizing Signature Title Telephone Number Date

GSA Contracting Officer Signature

(For Centralized Billing Agencies)

Agency Contracting Officer Signature

(For Direct Billing Agencies)

Date

Date

Sprint Only Information