

# LDH TELECOMMUNICATIONS CHANGE FORM

(WHEN YOU ASSIGN ANOTHER EMPLOYEE A DEVICE-THE AGENCY/DISTRICT/FACILITY TELECOMMUNICATIONS COORDINATOR **MUST** SUBMIT THIS FORM TO THE LDH TELECOMMUNICATIONS COORDINATOR)

DATE: \_\_\_\_\_

AGENCY: \_\_\_\_\_

SECTION: \_\_\_\_\_

TELECOM COORDINATOR/LIAISON: \_\_\_\_\_ BILL PAYER: \_\_\_\_\_

**CELLULAR SERVICES: (ONLY ONE DEVICE ASSIGNED PER EMPLOYEE)**

**CELL PHONE:**  AT&T  VERIZON **MIFI:**  AT&T  VERIZON **IPAD:**  AT&T  VERIZON

ACCOUNT NUMBER: \_\_\_\_\_

EMPLOYEE NAME CURRENTLY ASSIGNED TO DEVICE: \_\_\_\_\_

PHONE NUMBER OF DEVICE: \_\_\_\_\_

**CHECK ONE OR ALL THAT APPLY:**

**EMPLOYEE NAME TO CHANGE DEVICE TO:** \_\_\_\_\_

**SUSPENSION** -  WITH BILLING  WITHOUT FULL BILLING\*\* (DEPENDING ON THE DEVICE WILL DEPEND ON CHARGE)

**\*\*NOTE:** THERE ARE STIPULATIONS WHEN THIS OCCURS BY THE VENDOR (CONTACT LDH TC FOR FURTHER INFORMATION)

**CANCELLATION OF DEVICE:** (LIST REASON) \_\_\_\_\_

(NOTE: DEVICES CAN ONLY BE CANCELLED IF YOUR CONTRACT HAS EXPIRED ON THE DEVICE)

\_\_\_\_\_  
REGIONAL/DISTRICT/FACILITY TELECOMMUNICATIONS LIAISON SIGNATURE & DATE

\_\_\_\_\_  
AGENCY/DISTRICT/FACILITY TELECOMMUNICATIONS LIAISON/COORDINATOR SIGNATURE & DATE

\_\_\_\_\_  
LDH TELECOMMUNICATIONS COORDINATOR SIGNATURE & DATE (VERIFYING CHANGED IN SYSTEM)

**ZOOM:**

**\*\*NOTE\*\*** - ZOOM ACCOUNTS **CANNOT** BE TRANSFERRED FROM ONE EMPLOYEE TO ANOTHER.

CANCEL ZOOM ACCOUNT  REMOVE WEBINAR

USER LICENSE NAME: \_\_\_\_\_ USER LICENSE EMAIL: \_\_\_\_\_

BILLING ACCOUNT # \_\_\_\_\_

\_\_\_\_\_  
REGIONAL/DISTRICT/FACILITY TELECOMMUNICATIONS LIAISON SIGNATURE & DATE

\_\_\_\_\_  
AGENCY/DISTRICT/FACILITY TELECOMMUNICATIONS COORDINATOR SIGNATURE & DATE

\_\_\_\_\_  
LDH TELECOMMUNICATIONS COORDINATOR SIGNATURE & DATE (VERIFYING CHANGED IN SYSTEM)