[x] New order [ ]  Cancellation of existing optical / metallic cables, CE Colo designation:

[ ]  Cancellation of existing interconnection (Patch/Splice, CE Colo designation:

**Data Centre:** [ ] CE Colo

 [ ] DC7

**Customer (A point):**

**Customer (B point):**

The interconnection will be paid by: [x]  Customer (A point) [ ]  Customer (B point)

Price of the service: [x]  According to the valid price list of the CIOMIS service (paying customer) [ ]  According to the Customer’s Order Form

 (paying customer)

|  |  |  |
| --- | --- | --- |
|  | **A point** | **B point** |
| Line no. | Room no. | Rack | Cable (number, type, etc.) | ODF/DDF (type of termination) | Note | Room no. | Rack | Cable (number, type, etc.) | ODF/DDF (type of termination) | Note |
| 1 |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |

The work will only be started after the above table is completed and this document is signed by the customers affected. Cable (number, type, etc.): define the number of circuits (cables), interconnection type (e.g., optical (Single Mode – SM / Multimode – MM), Cat 6 (direct or crossover), coaxial cable. In the event of cancellation of any interconnection, the required signature must be attached by the Customer to whom the interconnection is charged. The Service Description for the CIOMIS service forms an integral part of this Customer Order Form, and the Customer agrees with this Service Description.

|  |  |
| --- | --- |
| **Customer (A point):** | **Customer (B point):** |
| Registered office: | Registered office: |
| Identification number: | Identification number: |
| Name: | Name: |
| Telephone: | Signature: | Telephone: | Signature: |
| E-mail: | Date: | E-mail: | Date: |

**Provider: CE Colo Czech s.r.o., Nad Elektrárnou 1428/47, 106 00 Prague 10, id. no.: 241 97 327, tax id. no.: CZ24197327**

|  |  |  |
| --- | --- | --- |
| Name/telephone/e-mail: | Date: | Signature: |