



United States Department of the Interior
U.S. Fish and Wildlife Service



Internet Service Provider (ISP) Reimbursement Agreement

Between

**Division of Information Resources and Technology Management, Branch
of Communication Technology (IRTM/BCT)**

And

USE THIS FORM FOR NEW ISP CONNECTIONS OR CHANGES TO EXISTING CONNECTIONS

Date:

Is this a new ISP connection, or a change to an existing connection?

New circuit Change to existing circuit

Site Information:

Billing Organization Code (the code used to RDS funds):

Office Organization Code:

Site Name:

Site Contact Name:

Phone Number: 555

Fax:

Technical Contact Name:

Phone Number:

Fax:

Street Address:

City:

State:

Zip Code:

How many users at this location?

How many servers are at this location?

What are the server names?

Internet Service Provider Information:

ISP name:

ISP phone number:

Date of installation:

Type of Connection:

DSL Cable Modem Satellite Frame Relay ISDN DTS Dialup Wireless

ISP-provided equipment (*some information may not be available until service is ordered):

Brand: _____ Model: _____

*Static IP address: . . .

*Subnet Mask: . . .

*Default Gateway: . . .

*Primary ISP DNS address: . . .

*Secondary ISP DNS address: . . .

Speed of Connection:

Download: _____ Upload: _____

Fees:

Apply one-time equipment fees to charge number:

Monthly recurring cost of service: _____ /month

Comments:

BCT Use Only	
Approved by: _____	Amount Approved: _____
Chief, Branch of Communication Technology	

NOTE: *If your site chooses not to go forward with this installation, please return this form to isp@fws.gov with a statement indicating that you are canceling this reimbursement request.*