

## **Instructions for Network Services/Project Request Form (OTS-16)(Rev. 02/2025)**

The Network/ Telecom Project Request Form (OTS-16) is used for non-routine telecommunications and network services requests that, due to size or complexity, require more than a typical service order.

A separate form is required for each physical location.

Agencies should work closely with OTS when preparing project requests. For assistance in completing the form, contact OTS:

- Voice Services: [voiceorders@la.gov](mailto:voiceorders@la.gov) or 225 342-7720
- Network Services: [networksupport@la.gov](mailto:networksupport@la.gov) or 225 219-4860

### **How do I know which form to use? Is my request a project or an order?**

For assistance in determining the most appropriate network services form to submit, contact OTS:

- Voice Services: [voiceorders@la.gov](mailto:voiceorders@la.gov) or 225 342-7720
- Network Services: [networksupport@la.gov](mailto:networksupport@la.gov) or 225 219-4860

In general, submit a project request when:

- 25 lines or more are affected
- A system is being upgraded

Specific reasons for project requests include, but are not limited to:

- An agency is moving from one location to another, constructing a new building or remodeling
- The telecommunications or network needs of an agency are no longer being met, and the agency would like to explore options (upgrade/replacement)
- The telecommunications system experiences frequent breakdowns or repairs and needs to be replaced
- An agency is expanding in terms of physical site and/or personnel
- An agency is changing its organization such that call coverage changes
- An agency is experiencing a significant increase in incoming and/or outgoing calls
- An agency is looking to make productivity gains or save costs by changing how it uses telecommunications services

### **What is the timeline for project completion? How far in advance do I need to submit the project request form?**

Generally, timelines for project completion range from two to six months. To discuss the timeline for a specific project, contact OTS:

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- Network Services: [networksupport@la.gov](mailto:networksupport@la.gov) or 225 219-4860

OTS recommends submitting the request as soon as appears project assistance is needed. This is especially important for larger, more complex projects.

### **How do I submit a project request form?**

OTS requests eligible agencies submit the Network Services Project Request through the [OTS Customer Self Service Portal](#). Refer

to [Customer Self-Service Ticketing System: Instructions for Project Requests](#).

Agencies unable to access the portal may submit the Project Request Form via email to [otssupport@la.gov](mailto:otssupport@la.gov).

#### *Executive Branch Cabinet Agencies (In-Scope)*

Use the interactive Network/Telecom Project Request available through the Communications Services/Network Services menu in the [OTS Customer Self-Service Ticketing Portal](#).

The portal is available to certain agencies, primarily executive branch agencies reporting to the governor. These include DOA, DCFS, LDH, DNR, LDEQ, WLF, LDVA, DPS, DOC, DOTD, LWC, LED, LDR, CPRA, GOHSEP, and associated agencies.

To find the Project Request Form within the portal:

- Connect to the Louisiana State Network, either directly or via VPN
- Go to <https://otssupport.la.gov>
- Select Service Catalog
- Select Communication/Network Services
- Select Network/Telecom Project Request
- Open a new request

Refer to [Customer Self-Service Ticketing System: Instructions for Project Requests](#) for guidance.

#### *All Other Agencies (Out-of-Scope)*

All other agencies may email the completed pdf form to [otssupport@la.gov](mailto:otssupport@la.gov).

#### **Who do I contact for help?**

For assistance in completing this form, contact OTS:

- Voice Services: [voiceorders@la.gov](mailto:voiceorders@la.gov) or 225 342-7720
- Network Services: [networksupport@la.gov](mailto:networksupport@la.gov) or 225 219-4860

#### **What information needs to be included on the form?**

Instructions for each field are shown below. When using the interactive form in the [OTS Customer Service Portal](#), available options will change based on previous selections.

A separate project request form is required for each physical location.

Still have questions? For more guidance and clarification, contact OTS:

- Voice Services: [voiceorders@la.gov](mailto:voiceorders@la.gov) or 225 342-7720
- Network Services: [networksupport@la.gov](mailto:networksupport@la.gov) or 225 219-4860

## BILLING INFORMATION

To be completed by the agency telecommunications coordinator

**NCS Account Unit** Agency's Account Unit Number. Account Unit Numbers (general ledger numbers/cost centers/accounting units) are made up of the region, agency number, and ISIS org number (ex. B815-3003)

**LaGov Cost Center** Agency's LaGov cost center. LaGov cost centers are 10 characters (ex. 815T015060)

**Is this an OSB Project?** Select Yes if the Office of State Buildings or Office of Facility Planning and Control is involved with this project

Otherwise, select No

If Yes:

**OSB Contact Name** Name of the Office of State Buildings contact.

**OSB ISIS Cost Center** Office of State Buildings ISIS cost center number

**OSB Contact Email** Office of State Buildings contact's email.

**Which costs should be charged to OSB?** Indicate what costs should be charged to the Office of State Buildings.

## AGENCY INFORMATION

**Agency** Name of the agency requesting the project. If submitting through the OTS Customer Service Portal, select from the drop-down.

**Section** Name of the section (if applicable).

If submitting through the OTS Customer Service Portal, select from the drop-down. If the appropriate section is not listed, Select "Section not applicable"

**Unit** Name of the unit (if applicable).

If submitting through the OTS Customer Service Portal, select from the drop-down. If the appropriate unit is not listed, Select "Unit not applicable"

**TC Approval** Name of the TC approving the request

If submitting through the OTS Customer Service Portal:

- A TC Approval Group is generated based on the agency/section/unit selected
- Submitting the form will send an approval request to all TCs in the TC Approval Group
- Only one authorized TC must approve the request by email or within the portal
- The submitter will be notified by email when the TC has approved the request
- OTS only sees the request after TC approval

**Main Telephone No.** Agency's current main telephone number

**Current Address** Agency's current physical address, including the zip code

## PROJECT DETAILS

**Project Scope** Ready to Implement--Select *Ready to Implement* if the desired completion date is within six months or in the current fiscal year. Quotes will be provided before

work is completed.

Budgetary Info Only--Select *Budgetary Info Only* if planning for a future fiscal year.

**Desired Due Date** Desired due date for the project. Must be at least 30 days from the request date. Most projects require a minimum of 60 days and may require as long as six months.

Due dates sooner than 60 days from the request date may incur expedite charges. A six-month lead time for projects is preferred.

The timeline for the project begins when OTS receives the TC-approved request.

To discuss an appropriate due date for the requested project, contact OTS:

- Voice Services: [voiceorders@la.gov](mailto:voiceorders@la.gov) or 225 342-7720
- Network Services: [networksupport@la.gov](mailto:networksupport@la.gov) or 225 219-4860

**Accept Expedite Fees?** Projects that require installation of new telecommunications services in fewer than 60 days from the request date may incur vendor expedite fees

Select Yes to accept expedite fees, or change the desired due date

## PURPOSE

**Office Relocation** Select if the agency's office is being relocated.

### Relocation Information

**New Address** Physical address, including the zip code, where the new system will be located

**Anticipated Occupancy Date** Anticipated date the agency will be at the new address.

If the agency already occupies the new building, indicate the date occupancy began.

**System Evaluation/Upgrade/Replacement** Select if an existing system needs to be evaluated, upgraded, or replaced.

**Service Expansion** Select if an existing service needs to be expanded.

**Wiring/Cable** Select if new wiring/cable needs to be installed or if changes need to be made to existing wiring/cable.

### Wiring/Cable Information

**Is This [Wiring/Cable] for a Newly Constructed Building or Renovation of an Existing Building?** Select Newly Constructed if the project is for a new building or a building under construction.

Select Existing Renovation if the project is due to the renovation of an existing building.

**Is This A Leased Building?** Select Yes or No. A complete lease agreement will be required before certain services can be ordered.

**Is Wiring Included In Capital Outlay?** Select the appropriate option.

The proposed state construction program submitted to the Louisiana Legislature annually is known as the capital outlay bill. Questions may be addressed to the Office of Facility Planning and Control.

<b>Please Select All That Apply</b>	Select the appropriate option: Multi-building (campus) or Multi-floor.
<b>Is Outside Wiring Needed?</b>	Select the appropriate option.
<b>Does the Project Require Installation/Modification to More Than 25 Inside Cable Drops?</b>	Select the appropriate option.
<b>Recurring Cost for Budget Year</b>	In general, Select if requesting a quote for recurring cost(s), and specify the budget year.
<b>SERVICES/TECHNOLOGIES REQUESTED</b>	
<b>VOICE COMMUNICATIONS</b>	Select if requesting voice communications systems/technologies.
<b>Key System</b>	Select if the voice communications system requested is a key system.  If applicable, specify key system currently in use (examples: Executone, Avaya), and the anticipated number of end users at the project site.  Indicate the current voice service type (analog, business lines, ISDN, PRI, SIP), and the current number of end users on the existing voice service.
<b>PBX System</b>	Select if the voice communications system requested is a PBX system.  If applicable, specify the PBX system currently in use (example: Avaya, Carousel), and the anticipated number of PBX system end users at the project site.  Indicate the current voice service type (analog, business lines, ISDN, PRI, SIP), and the current number of end users on the existing voice service.
<b>Hosted Voice Service (HVS)</b>	Select if the voice communications service requested is HVS.  Specify if the agency is currently using OTS HVS at this location or other locations, and the anticipated number of end users at the project site.
<b>Centrex</b>	Select if the voice communications service requested is Centrex.  Specify the anticipated number of Centrex end users at the project site.
<b>Overhead Paging System</b>	Select if the voice communications system requested is an overhead paging system.  If there is an existing paging system, specify what type.
<b>PRI</b>	Select if the voice communications system requested is PRI. Specify if there is an existing PRI service and the number of existing end users.
<b>SIP</b>	Select if the voice communications system requested is SIP. Specify if there is an existing SIP service and the number of existing end users.
<b>ACD/Contact Center</b>	Select if ACD/Contact Center is being requested.
<b>Other Option</b>	Select if the requested voice communications system/service is not listed. Specify the request.
<b>DATA COMMUNICATIONS</b>	Select if data communications (network connectivity, Internet) are being requested.
<b>Local Area Network</b>	Select if this is a Local Area Network request (workstations, printers, IP cameras, Wi-Fi, etc.) Specify how many wired connections are needed.
<b>Internet Connectivity</b>	Select if Internet connectivity is being requested.
<b>Agency Connectivity</b>	Select if agency internal resources (data center/other sites) are being requested.

<b>Other Option</b>	Select if the data request is not listed. Specify the request.
<b>Additional Project Details</b>	Describe any additional project details.
<b>General Attachments</b>	Indicate what floor plans and relevant documents are included with the request.

## PROJECT CONTACTS – VOICE COMMUNICATIONS

<b>Agency's Voice Contact Name</b>	Name of the agency's voice contact.
<b>Agency's Voice Contact Email</b>	Email of the agency's voice contact.
<b>Agency's Voice Contact Phone</b>	Phone number of the agency's voice contact.
<b>Is the previous contact onsite?</b>	Select the appropriate option. If no, specify the onsite voice contact's name, email, and phone number.

## PROJECT CONTACTS – DATA COMMUNICATIONS

<b>Agency's Data Contact Name</b>	Name of the agency's data contact.
<b>Agency's Data Contact Email</b>	Email of the agency's data contact.
<b>Agency's Data Contact Phone</b>	Phone number of the agency's data contact.
<b>Is the previous contact onsite?</b>	Select the appropriate option. If no, specify the onsite data contact's name, email, and phone number.

## SUBMITTER INFORMATION

<b>Name</b>	Name of the person completing the form.
<b>Email</b>	Email of the person completing the form.
<b>Phone</b>	Phone number of the person completing the form.
<b>Today's Date</b>	Date of form completion.

Submission Instructions:

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