Phoenix Premium Files Services
Service Agreement

Please fax to: 202 – 687 – 1162

*Phoenix is purchased in **2GB** increments on an annual basis and billed at the beginning of the fiscal year. The rate will be adjusted each year to reflect the costs of proving premium space. The rate for FY 2009 is **$100/2GB annually**.*

Department Name: _____

Purchase Request:

☐ Account Creation ☐ Increase Current Space EFS # _____ ☐ Decrease Current Space EFS # _____

File Space Requested: _____GB
***2GB** increments only*

Purpose of this space: _____

Requested Date: _____

Cost Center: _____

Annual Charge: **$**_____

Departmental Share Administrator: _____
Print Name, Title, Extension, and NetID

_____
Signature

Department Budget Authorization (*if Different from requestor)* _____
Print Name, Title, Extension, and NetID

_____
Signature

- -

UIS Information – UIS Completes

First Year Prorated: **$**_____

Next Billing Cycle: July _____

Ticket Number: _____

AITS Approval: _____
Print Name, Title

_____
Signature

NCS Approval: _____
Print Name, Title

_____
Signature

UIS Business Service Center Received by: _____
Print Name, Title