

Permit Zahn
Design

JT
Track

Issued
T-Ray
10/26/16
169'

Comcast

Plant Maintenance Request

v4

Job number

NW432

Node DC152 City Maple Grove Date 10/24/2016

Address 10686 Boundary Creek Ter Cross Street 106th pl n

Maint tech Name: Igor Romansov Tech # 1542 Phone: 612-875-6743

Span type span (temped) Span (no temp) Digup Other Spring

Priority	1	<input checked="" type="checkbox"/> a.) Customer Impacting Issue b.) Vulnerable temp c.) TIE related ticket
	2	<input type="checkbox"/> a.) Aerial temp cables b.) Any temp - no liability issues
	3	<input type="checkbox"/> a.) Identified cables - no customer impact b.) Leaks - no customer impact

Work is needed : ASAP Normal

Work is a :	<input checked="" type="checkbox"/> Cable Replacement	<input type="checkbox"/> Broken Lashing	<input type="checkbox"/> Pole Transfer	<input type="checkbox"/> Damaged Ped
	<input type="checkbox"/> Utility Violation	<input type="checkbox"/> Storm Damage	<input type="checkbox"/> Leakage	<input type="checkbox"/> Other

MDU? (Attachments, lockboxes, cable on the roof) Yes No

Type of Cable Aerial UG Bare UG Duct Self Support Size: 625

Footage: Aerial _____ **Underground 169'**

Bore Required Yes No If yes, what type and how many 2 driveways

Is there fiber in the package? Yes No How Many Fibers? _____

Cause for referral:	<input checked="" type="checkbox"/> RTM	<input type="checkbox"/> Leakage	<input type="checkbox"/> Rapid Resolve (Flux)	<input type="checkbox"/> Damage/Outage	<input type="checkbox"/> NH/MH
(check one)	<input type="checkbox"/> Priority plant fault	<input type="checkbox"/> LPI	<input type="checkbox"/> Service Call Alert	<input type="checkbox"/> PI Ticket	<input type="checkbox"/> Other

Explain Damage:

High end rolloff resulting in 6 dB loss and intermittent degradation of service. TDR shows fault at 97 ft however there are signs of water damage at 8v tap so it is unclear whether or not digup will be successful.

Maintenance Department Use Only

Date Received _____ Capitol Yes No Maint complete
Total Tech Hours _____ Techs _____

A Highlighted plant map must be attached

To help expedite this maintenance request, information on this form needs to be filled out completely and signed by a technician and a supervisor requesting the repair.

Tech Signature Igor Romansov Tech # 1542 Date 10/24/2016
Supervisor Signature _____

Construction Department Use Only

Date received _____ Project # _____ Construction Completed
Coordinator Signature _____ Supervisor Signature _____

