

**Louisiana Office of Telecommunications Management  
Capitol Park Request Form (OTM-50)**

OTM Order No. \_\_\_\_\_

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Agency \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_ Phone No. \_\_\_\_\_  
City \_\_\_\_\_

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Vendor \_\_\_\_\_ Contact \_\_\_\_\_  
Address \_\_\_\_\_ Phone No. \_\_\_\_\_  
City \_\_\_\_\_

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Agency Order No. \_\_\_\_\_ Vendor Order No. \_\_\_\_\_

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Type of Service Desired

Innerduct \_\_\_\_\_ Fiber Optic Cable

Multi-mode No. Strands \_\_\_\_\_

Single-mode No. Strands \_\_\_\_\_

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Date Service Desired \_\_\_\_\_

Service Desired for What Purpose \_\_\_\_\_  
(Cameras, HVAC, Card Access, CATV, etc.)

Equipment Brand Name \_\_\_\_\_ Model No. \_\_\_\_\_

Maximum dB Loss Budget \_\_\_\_\_

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Source Bldg. \_\_\_\_\_ Room No. \_\_\_\_\_

Destination Bldg. \_\_\_\_\_ Room No. \_\_\_\_\_

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OSB Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Fax the completed form to OSB at 225-219-4810.