Customer Acceptance

Thank-you for your interest in connecting to the OptiComm Fibre Connected Community – Australia's fastest and most advanced fibre optic network. As a member of this community you will be able to receive all your broadband, telephone and entertainment services[†] over a single fibre optic cable.

Please complete this checklist and fill out the address of the property, sign and fax to

03 90249599 or scan and email to ccid@opticomm.net.au

I, _____ of _____ hereby authorise OptiComm Co Pty Ltd to proceed with an installation of ONT, enclosure and power supply to my property located at _____ and establish a connection to the Opticomm network.

I/We have confirmed with the builder that the house has been prepared in accordance with our published specifications and the following conditions have been met:

☐	A continuous **undamaged** white Telecommunications P20 conduit (ID 23.3mm) has been installed and connected to the Opticomm starter pipe and terminated in a clear area on the side of the building, directly below where the internal conduit (see point 3 below) protrudes from the wall.
☐	The conduit is installed at a minimum depth of 300mm; uses rounded bends **(No 90 Degree bends)**; extends at least 300mm but no more than 1600mm above ground level and is saddle clamped to the exterior wall and has a free draw wire installed end to end.
☐	An Internal or flexi conduit has been installed between your nominated installation location for the Network Termination Device (or ONT) and the external conduit mentioned above; is at least 300mm but no more than 1600mm above ground level; and is fitted with a draw wire.
☐	A GPO (Power Outlet) has been installed in the garage near the nominated installation location for the Network Termination Device.
☐	A Licensed Telecommunications cabler has terminated, tested and labelled ALL cables and has provided me/us a completed and signed Telecommunications Cabling Advice notice (TCA1 Form).
☐	I/We have a Structured Cabling System (SmartWired™) installed in our house. Between the Home Distribution Unit and our nominated NTD location there is installed a minimum of one Cat5e cable labelled as *data* and terminated with an RJ45 connector; one Cat5e cable labelled as *telephone* and terminated with two RJ12 connectors; and one RG6 Quad Shield cable terminated with a Foxtel approved F-Type connector.
OR	
☐	I/We have no Structured Cabling System but the builder has installed the cables between our chosen rooms and nominated NTD location: Home Office (or other location) - one Cat5e cable labelled as *data* and terminated with an RJ45 connector; Kitchen (or other location) - one Cat5e cable labelled as *telephone* and terminated with two RJ12 connectors; Living Room (or other location) one RG6 Quad Shield cable terminated with a Foxtel approved F-Type connector.

I/We agree that should any of the above specifications not be met a Failed Installation Fee of $95 plus GST will be charged by OptiComm. We will have to undertake to rectify the issue, and then rebook a new appointment once the corrective actions have been completed and the Failed Installation Fee is paid.

Signed: _____ Date: _____

[†] FTA and Foxtel Pay TV services may not be available in every estate. Please check with your developer or Opticomm to confirm availability of TV Services in your area.

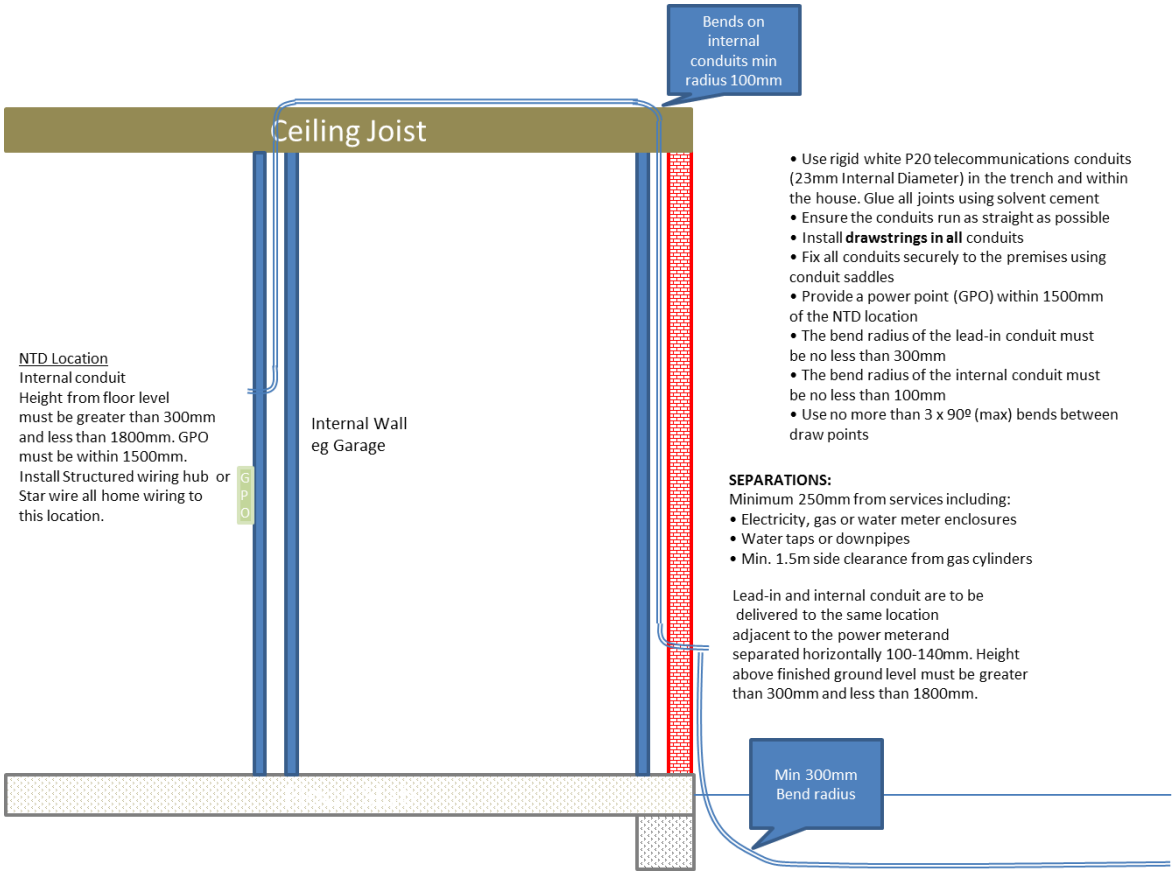

Figure 1 - Example conduit configuration

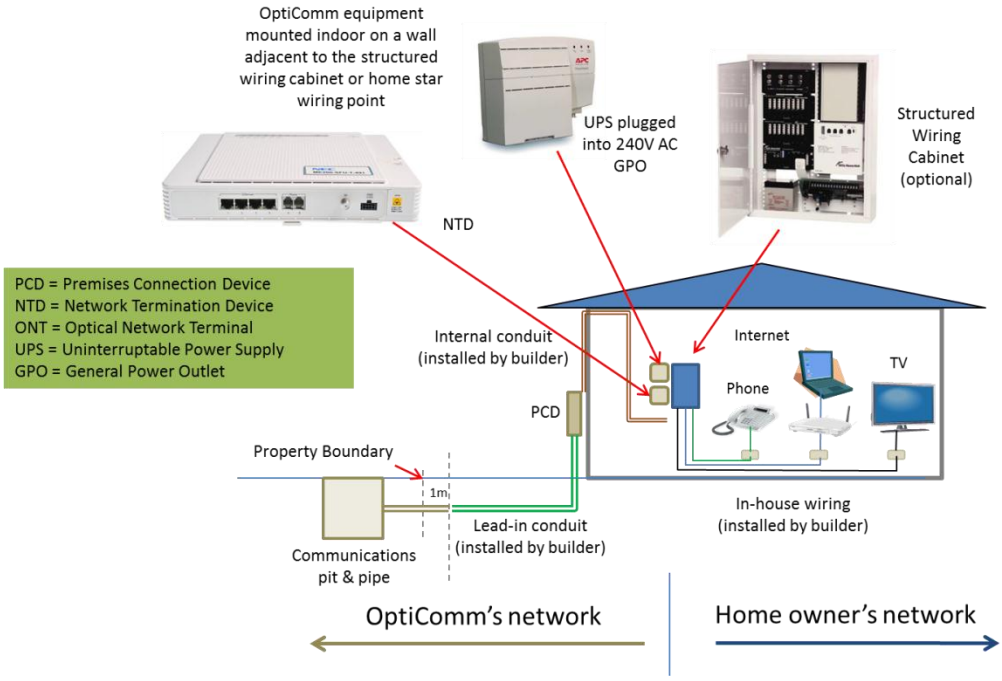

Figure 2 - Example fitoff

Telecommunications Cabling Advice (TCA1)

Australian Government
Australian Communications and Media Authority

Copies required for customer, cabler and employer (if applicable)

Instructions for completion

Requirements

A registered cabling provider must complete this form after each cabling job (except for certain exemptions). Cablers must retain a copy of this form for at least 12 months and pass a copy to the customer and/or employer.

Print clearly. Illegible, unclear or incomplete application forms may delay processing.

Where proposed works may be compromised by existing cabling, a TCA2 form should be completed.

Enquiries

For advice on completing this form, please go to ACMA's website at www.acma.gov.au (go to For licensees & industry: Service & technical requirements > Telecommunications : Cabling requirements > TCA forms > How to complete TCA forms).

Technical enquiries about cabling should be directed to:

Email: cablingqueries@acma.gov.au

Tel: 1300 850 115

Registered cabling provider

Name

SURNAME

GIVEN NAMES

Address

Contact details

WORK ( )

MOBILE

Registration number

Name of registrar

Employer (IF APPLICABLE)

Name of company

Contact details

WORK ( )

MOBILE

Address

POSTCODE

Description of work (INCLUDING ANY SUPERVISION)

Customer details

Name

Address

POSTCODE

Contact details

WORK ( )

FAX ( )

Certification

I hereby certify that the cabling work described in this advice complies with the Wiring Rules (AS/ACIF S009:2006 or its replacement).

SIGNATURE

DATE

PRINT FULL NAME