Use Arrow down and Arrow up only Only use arrow down/up keys to navigate

mpscs new service request

Michigan Department of Technology, Management and Budget

**DTMB-0067 Revised 3/7/2017**

MPSCS Use Only – EAM Number:

# Section 1. Requester Information

1. Requester Name

1. Request Date

1. Office / Division / Section / Unit

1. Admin. Phone

1. Admin. Fax

1. Admin. Email Address

|  |  |  |
| --- | --- | --- |
| \Requester Signature | Printed Name | Date |

# Section 2. Equipment / Service Requested

1. Check Appropriate Boxes

MPSCS – 800 MHz Radios

Template

Talkgroup

New ID Numbers

ID Changes

Inhibit Radio

Add New Vehicle to Fleet

Loaner Radio

Other:

Conventional Radios

Additional Radios

Loaner Radio

New ID Numbers

Other:

1. Date Equipment / Services Needed (Be Specific)

1. County Where Work is to be Performed

1. Justification

# Section 3. Agency Billing Detail

| DEPT | ACTG TEMPLATE | UNIT | LOC | OBJ | DOBJ | PROG | PHASE | PROGP |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |

| APPN | FUND | SFUND | ACTV | FUNC | TASK | TASKO | BSA | BFY |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |

# Section 4. Section Approval

1. Projected Cost

1. Contact Person

1. Telephone

|  |  |  |
| --- | --- | --- |
| Approved by Signature | Printed Name | Date |

# Section 5. Division Approval

1. Projected Cost Assessment

1. Approved

Disapproved

|  |  |  |
| --- | --- | --- |
| Approved by Signature | Printed Name / Title | Date |

# Section 6. MPSCS Action

1. Approved

Disapproved

1. Completion Date

1. Assigned To

1. Forwarded To

|  |  |  |
| --- | --- | --- |
| Approving Director Signature | Printed Name | Date |

1. Additional Information Needed

|  |  |  |
| --- | --- | --- |
| Completed by Signature | Printed Name | Date |

DISTRIBUTION: DTMB MPSCS, 7150 Harris Drive, Dimondale, MI 48821, FAX: 517-284-4066