

# TRA Order Request Form

<b>TELECOM ROUTING ADMINISTRATION (TRA)</b> Customer Care Center 444 Hoes Lane, Room 1P360 Piscataway, NJ 08854-4157	Phone: 732-699-6700 Toll free: 1-866-NPA-NXXs, (1-866-672-6997) Fax: 732-699-5080 website: <a href="http://www.trainfo.com">www.trainfo.com</a> , email: tra@iconectiv.com
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**New Order**   
  **Change to an existing Order**   
 Purchase Order (PO) Number, if required:

Primary/Ship-To <small>Please type or print clearly below</small>	Bill-To <input type="checkbox"/> Check if same as "Primary/Ship-To"
Name	Name
Company	Company
Title	Title
Address	Address
City State/Prov Zip/Postal Code	City State/Prov Zip/Postal Code
Phone	Phone
Fax	Fax
Email	Email

PRODUCT NAME	DISTRIBUTION			QUOTED PRICE* (Annual)
	FREQUENCY	FORMAT	START MONTH/YEAR	
* Quoted prices are only valid for 90 days from the date noted on the TRA Price Request Form and are exclusive of all applicable taxes. ** Applicability of taxes varies due to several factors. Payment of taxes is required unless an appropriate tax exemption certificate is provided. Please contact TRA CCC for tax and total amounts prior to submitting this form for prepaid orders.			<b>Subtotal</b>	
			<b>Sales/Other Tax**</b>	
			<b>Total</b>	

**Prepaid By Credit Card: (Contact Customer Care Center)**  
 American Express   
  MasterCard   
  Visa

**Prepaid By Check:**

- Must be payable in U.S. dollars
- Make out to "Telcordia Technologies Inc. d/b/a iconectiv"
- Mail check along with this TRA Order Request Form to address above.

**Bill Us** (n/a for prepaid products)   
  **Annually**   
  **Per Distribution Frequency** (incurs a 3% service charge)

Signature of Ship-To Addressee	Date	Signature of Bill-To Addressee	Date
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**Signing above indicates acceptance of License Agreement Terms and Conditions provided with this form.**

**\*\*A SIGNATURE IS REQUIRED FOR EACH ADDRESSEE. UNSIGNED FORMS WILL NOT BE PROCESSED\*\***

===== **The section below is to be completed by TRA** =====

Approval No:	Date:	Amount:	Contract No.
Received By:	Date Received	Date Entered	Customer No.