

CROSS-CONNECT ACTIVATION REQUEST

The under	rsigned (full name)		as (title)		
on behalf	of the below specified	d COMPANY, a full member of the Consortium,	requests the activation of th	he below listed services as p	rovided by the Consortium.
PROVIDER COMPANY NAME			COMPANY DEPT.		
COMPANY CONTACT			NAMEX CONTACT		
COMPANY ORDER REF.			NAMEX ORDER REF.		
	NOTES				
		CROSS CO	NNECTS DETAILS		
		Augustus 🗔	Viole Alexandra Contact	F:#-1 400 00440 D (D)	14
DATACENTER		Augustus □ Viale Alexandre Gustave Eiffel, 100 - 00148 Roma (RM) Caesar □ Via dei Tizii, 6B - 00185 Roma (RM)			
(The order will NOT be processed unless ONE datacenter is selected)		Tiberius □ Via di Tor Cervara, 282 - 00155 Roma (RM) Bari □ Viale Donato De Leonardis, 19 - 70132 Zona Industriale Bari (BA)			
A - PROVIDER END		DAII L	B - CUSTOMER END		C - RESERVED
REQ (*)	MMR DEMARC	PRE-CABLING INFO / NOTES	COMPANY NAME	MMR DEMARC	NAMEX NOC NOTES
Namex T	echnical Regulations	ellation; M = Modification (describe the request is all cross-connects passing through the Meet-year. Prices valid in 2022 in Rome (Augustus, Control of the control of t	Me MPO Infrastructure are Caesar, Tiberius) - 10 € for	charged a recurring month the first five, 50 € for all subs	y fee according to the Namex
		six, ∠o€ for all subseque	ent. All prices are excluding	y VAI.	
PROVIDER APPROVAL			NAMEX APPROVAL		
signature date (dd mmm yyyy)			signature exec date (dd mmm yyyy)		
			completion date		
NOTE: FILLED-IN FORM MUST BE SUBMITTED TO < support@namex.it> FOR PROCESSING					

Cross-connect Activation Request Version 4.0 edited 4-May-2022