Work Order # S10491072



By accepting this work order you agree to complete this form, including the site manager's signature, and return it to us in order for us to meet our customer's billing requirements. Your return to us of completed paperwork is a critical element in our timely payment to you for services rendered.

### CUSTOMER

Customer: KPS, LLC

Site: Kroger

Address: 1225 Caroline St NE

Atlanta, GA 30307

City, State - Zip: Atlanta, GA - 30307

Corner Addr:

Phone: 404-880-4105

Tech to be OnSite Before: 10/11/2021 10:00:00AM EDT

(See Trip Info Section Below)

Requested By: Shawn McDaniel

Customer Order #: 22683147

Problem Code: 4052 KR - Telephone System Issue

#### CROSSCOM INFORMATION

Contact: Log in and out via IVR 1-800-820-9229

Question Call: 1-800-820-9229 Fax D & A to 1-800-933-5538

Team: Red

Dispatcher Notes:

### **BRIEF STATEMENT OF WORK & COMMENTS**

CRASH KIT MNX #133442993 - ETA 8:45am

BCM 400 Expansion cabinet power supply died after safe shutdown.

Did a safe shutdown on the BCM for a switch replacement.

On powerup the BCM's expansion cabinet would not power back on.

Tested power source, reseated cable, and tried power cycling again, no change.

Dispatching Crosscom. \*\*\* BCM Expansion Cabinet down \*\*\* (PC:22683147)

# \*\*\*\*TECHNICIAN IS NOT TO DO ANY WORK UNTIL CONTACTS CCN LEVEL 2\*\*\*\*

--> VFT must inventory all items plugged into UPS \* This needs to be updated in ticket notes when tech first walks in.

\*\*\*Please be sure the tech brings a must have a laptop and ethernet cable with serial port, a cross over cable, and a null modem cable as the device may need to be reconfigured. RJ45 Loop back plug and cable tester\*\*\*

\*\*THE TECHNICIAN MUST WORK WITH CCN LEVEL 2 SUPPORT ONCE ON-SITE\*\*

### \*\*THE TECHNICIAN MUST CALL CCN TO LOG OUT WITH THE KSC BEFORE LEAVING SITE\*\*

All defective/unused equipment must be returned to CrossCom National. Technician must obtain an RMA from level 1 before leaving site. Do not leave the equipment on site -- it must be returned to CrossCom National

### SAFETY/PPE: TECHNICIAN MUST HAVE A FACE MASK TO ENTER THE STORE

Tape off your work area so the customer can maintain distance

Be prepared for potential temperature check prior to store entry

# TECH REQUIREMENTS:

TECHNICIAN MUST BE IN THE STORE TO LOG IN

THE TECHNICIAN MUST CALL CROSSCOM TO LOG OUT BEFORE LEAVING SITE

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Arrival Date 10/11/2021 Arrival Time 10:00 AM TimeZone EDT <u>TripDescription</u> Service NoOfTechs NoOfTechs

## TECHNICAL NOTES

**EMERGENCY TICKET** 

TECH MUST BE ON SITE BY THE TARGET TIME

EMERGENCY RATES APPLY

Travel Charges for this WORK ORDER ---- NONE

Only one (1) tech is approved for this work order

ADDITIONAL TRIPS WILL BE UNDER STANDARD RATES, UNLESS OTHERWISE NOTED

Technician MUST close with CrossCom PRIOR to leaving site.

Failure to log out with CrossCom BEFORE leaving site may result in nonpayment!!

All defective / unused equipment must be returned to CrossCom. Technician must obtain an RMA from level 1 before leaving site. Do not leave the equipment on site -- it must be returned to CrossCom

The technician needs to call and get approval for any time over 60 minutes.

Additional time over 60 minutes will not be billable without approval from CrossCom.

"Field Service Representatives must upload the technician data sheet from site before closing out with the service team. The technician must fax the technician data sheet to 800-933-5538 if the paperwork cannot be uploaded."

DO NOT LEAVE ANY EQUIPMENT ON-SITE

## MATERIAL ON ORDER

Part Number NONE Part Description

Provided By

Quantity

### SPECIAL TOOLS

Tool Description NONE

Provided By

### **OPTIONAL ITEMS**

Note: Confirm with CrossCom before performing any of these activity.

Description NONE

Quantity

Work Order # \$10491072



CHNICIAN DATA					
Trip#	Date	On-Site At	Off-Site At		
				Manager	Signature
				Manager P	rinted Name
Description of Wo	ork:			Additional Trip Required? Yes	/ No
Customer Abuse (	(Circle): Yes	No Explair	1:		
Trip#	Date	On-Site At	Off-Site At		
				Manager	Signature
				Manager P	rinted Name
Description of Wo	ork:			Additional Trip Required? Yes	/ No
Customer Abuse (	(Circle): Yes	No Explain	1:		
IMENTS					
Manager Signature		Date & T	Time To	echnician Signature	Date & Time

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March 23, 2020

SUBJECT: COVID-19 VIRUS (Essential Worker)

To Whom It May Concern,

I am actively employed by CrossCom National, LLC, as a technician and responsible for the repair, service and maintenance of technology equipment inside retail stores. We serve supermarkets, pharmacy chain stores, and other essential retailers. Those retailers we support, include, but are not limited to the following and their associated brands:

- Target
- Costco
- Albertsons
- Safeway
- Kroger
- Sam's Club
- Walmart
- Walgreens

- Rite Aid
- Food Lion
- Hannaford
- Dollar General
- Family Dollar
- AutoZone
- Advanced Auto Parts

We are considered essential as we support critical services within our customer base that allow these essential retailers' IT infrastructure, Alarm Systems, and Telecommunications Infrastructure to remain functional and in good working order. If there are any questions or concerns related to my working during this time or during any future "shelter in place" action within this location, please contact my employer representative, Ken Miller (Director, Field Services) at (847) 850-6298 (Direct) or (847) 903-7996 (Cell).

CrossCom 900 Deerfield Parkway Buffalo Grove, IL 60089

> 847-520-9200 847-419-4884

www.crosscom.com