FCC Form 481 OMB Control No. 3060-0986

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NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description - Wireline (including cable) VoIP (Yes/No)	Service Outage Description - Wireline (including cable) Voice (non-VoIP) (Yes/No)	Service Outage Description - Cellular (Yes/No)	Service Outage Description - Voice Over LTE (VoLTE) (Yes/No)	Service Outage Description - 911, E911 or NG911 Services only (Yes/No)	Service Outage Description - Other (Enter up to 50 characters of text)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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