

State 911 Department PSAP Application for Annual Funding

LOCATION INFORMATION

PSAP Name

Contact Name

E-mail Address

Phone Number

How many Fire/EMS agencies does the PSAP serve?

How many law enforcement agencies does the PSAP serve?

What region is the PSAP in?

Has the PSAP's geographical area changed? Yes No

If yes, please describe?

CALL PROCESSING EQUIPMENT

Make of Call Processing Equipment

Model of Call Processing Equipment

Description of Call Processing Equipment

Has the PSAP signed a new CPE or CAD contract within the last year? Yes No If "Yes" please provide a copy of the contract.

Maintenance Contract End Date

Text-to-911 Implementation Date

<u>Hardware</u>	<u>Software</u>	<u>CAD</u>
Date Installed <input type="text"/>	Date Installed <input type="text"/>	Vendor <input type="text"/>
Date Last Upgraded <input type="text"/>	Date Last Upgraded <input type="text"/>	Date Installed <input type="text"/>
Next Upgrade Expected <input type="text"/>	Next Upgrade Expected <input type="text"/>	Next Upgrade Expected <input type="text"/>

What company provides the PSAP's internet service?

When was the PSAP's last cybersecurity assessment?

Does the PSAP have a continuity of operations plan (COOP) Yes No

GEOGRAPHIC INFORMATION SYSTEMS

GIS Analyst/Vendor

Has the PSAP signed a new GIS contract within the last year? Yes No If "Yes" please provide a copy of the contract.Name Mapping system
software/vendor in your PSAP

Start Date of GIS Maintenance/Support Contract

End Date of GIS Maintenance/Support Contract

Name of PSAP's MSAG Coordinator

Date of Last Submission of GIS Data to the PSC

Does the PSAP have a Next Generation Compliant Address Point Layer? Yes No**STAFFING & TRAINING**

Number of call taking seats

Number of full-time call takers

Number of part-time call takers

Is PSAP fully staffed? Yes No

How many of the following full-time staff does the PSAP have?

Position	Number of Staff
Supervisors	<input type="text"/>
Managers	<input type="text"/>
Training Officers	<input type="text"/>

Has the PSAP staff met the training requirements? Yes No

Which training program does the PSAP use?

FUNDINGWhat was the total cost to operate your PSAP for the **previous calendar** year? Please list the amount spent for each of the resources below.

Source	Amount	Other Type
General Funds	<input type="text"/>	<input type="text"/>
Landline	<input type="text"/>	<input type="text"/>
Wireless	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>
Total	<input type="text"/>	<input type="text"/>

Call Volume will be figured using ECaTS data.

Failure to file the completed application by the March 31 may result in loss of funding.

I verify that all information on the above application is true and correct to the best of my knowledge.

I certify that this PSAP has not diverted wireless, wireline, or VOIP 911 surcharge funds to other than 911 uses, and we have complied with all federal rules regarding 911 fee diversion.

Signature

Date: