

	Department of Information Systems Arkansas Wireless Information Network	
	Permanent Radio System Interconnect Request	
Effective Date:	Revision Date: 03/02/2018	Issued By:

Interconnect Request Term Definitions:

Hosting Agency: Owner or Controller of Talkgroup to be used for interconnection

Participating Agency: Non-hosting, non-controlling participant agency

Requesting Agency: Agency initiating and driving the process to request and establish the interconnection; may be submitted by either Host or Participant.

Requesting Agency:	
Requesting Contact Name:	
Requesting Contact's Title	
Requesting Contact's Phone:	
Requesting Contact's Email:	

AWIN Talkgroup to be used to interconnect:			
Radio ID of the AWIN Radio to be used to interconnect:			
Is this Talkgroup owned by Requesting Agency?	YES _____	NO _____*	
*If NO : Name of Agency that Owns (Hosts) the interconnect talkgroup:			
Briefly explain the justification for the interconnection: _____			

Required: Please attach to this application the Hosting Agency's *Standard Operating Procedures (SOP)* for the use of this interconnection. This information should include:

- Who is authorized to use the interconnection;
- How and when the interconnection should be used;
- How the interconnection will be monitored, and
- Who is responsible for continuously monitoring the interconnection.

CONTROLS:

It is understood that the integrity of the system is paramount to the safety of the citizens of Arkansas and the public safety responders responsible for ensuring that safety. For that reason, all signatories of this agreement shall not take any action that would in any way detrimentally affect the system, or those affected by the system.

AWIN Management and Operations may deactivate the interconnected radio if there is a malfunction with the interconnection, or if the user is proven to be non-compliant with the terms of this agreement or associated policies. Deactivation will occur only after all other measures have been utilized and the user has been fully informed of the deactivation. No user will be deactivated without prior notification of all parties to this agreement.

By signing below, you certify that the agency representative has read the responsibilities section of the instructions; that the agency agrees to abide by said responsibilities.

REQUESTING AGENCY SIGNATORY:

Print Name: _____ Title: _____

Signature: _____ Date: _____

Email: _____ Phone: _____

HOSTING AGENCY SIGNATORY (IF DIFFERENT FROM REQUESTING):

Print Name: _____ Title: _____

Signature: _____ Date: _____

Email: _____ Phone: _____

ADDITIONAL PARTICIPATING AGENCY SIGNATORY:

Print Name: _____ Title: _____

Signature: _____ Date: _____

Email: _____ Phone: _____

ADDITIONAL PARTICIPATING AGENCY SIGNATORY:

Print Name: _____ Title: _____

Signature: _____ Date: _____

Email: _____ Phone: _____

ADDITIONAL PARTICIPATING AGENCY SIGNATORY:

Print Name: _____ Title: _____

Signature: _____ Date: _____

Email: _____ Phone: _____

For completion by AWIN or AICEC Representative:

Interconnect Request Approved by AICEC? **APPROVED:** _____ **NOT APPROVED:** _____

Comments: _____

Authorized Signature

Printed Name

Date