STATE OF ILLINOIS

ILLINOIS STATE POLICE

Statewide 9-1-1 Bureau
Email: isp.911tech@illinois.gov

9-1-1 Vendor Technical Liaison Form

FEIN Number: _____

Name of Carrier: _____

Address: _____

City:_____ State: _____ ZIP: _____

Type of Service (Post-Paid Wireless, Wireline, VOIP): _____

Company contact for technical and all non-surcharge issues:

Name:_____

Phone Number: _____

Email: _____

* Please complete the above form and return to the Statewide 9-1-1 Technical Manager at

isp.911tech@illinois.gov

Division of Statewide 9-1-1
Statewide 9-1-1 Bureau
801 South 7th Street, Suite 300S
Springfield, Il 62703