

STATE OF ILLINOIS



ILLINOIS STATE POLICE

Email: 911_Admin_Support@isp.state.il.us

FEIN Number: _____

Name of Carrier: _____

Address: _____

City: _____ State: _____ ZIP: _____

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

Company contact for surcharge and remittance issues:

Name: _____

Phone Number: _____

Email: _____

Company contact for 9-1-1 notifications related to non-surcharge issues:

Name: _____

Phone Number: _____

Email: _____

Please complete the above form, attach a completed W-9 form and return to the 9-1-1 Administrative Support Command Staff at 911_Admin_Support@isp.state.il.us .