STATE OF ILLINOIS



ILLINOIS STATE POLICE

Email: isp.911tech@illinois.gov

FEIN Number:			
Name of Carrier:			
Address:			
City:	State:	ZIP:	
Type of Service (Pos	t-Paid Wireless, Wireline	, VOIP):	
Company contact fo	or technical and all non-s	surcharge issues:	
Name:			
Phone Number:			
Email:			
* Please complete the	e above form and return to	the Statewide 9-1-1	Technical Manager at
isp.911tech@illinois	.gov		