## **Emergency Services Communication Bureau** ADDRESSING OFFICER CONFIRMATION FORM (or Alternate AO)

The following individual being designated as an Addressing Officer is authorized to approve and provide addressing information to the Emergency Services Communication Bureau for Enhanced 9-1-1 purposes.

**Please Note:** This form may also be used for an Alternate AO where more than one person is needed to cover a given territory. Please check the box indicating this on the form.

Municipality & / or County Represented NOTE: If this appointment is for a County AO (multiple towns/townships), then please indicate this by checking						
the Town or County box to the right. (please check the box)						
Municipality or County				☐ Town ☐ County		
					5	
Addressing Officer Information			Is this for an Alternate AO? $\Box$ Y $\Box$ N			
First Name	MI	Last Name	·	Suffix	Title	
Address						
				r		
City				State	Zip	
Phone				Fax		
Email						
Authorization						
Signature of Authorizing Official*				Title		
Printed Name of Authorizing Official				Date		

\* Authorizing Officials can either be the Chief Administrative Officer or Chief Elected Official.

## Please sign and return to:

Mail: Susan Alderson, Emergency Services Communication Bureau, 18 SHS, Augusta, ME 04333-0018 Email: <u>Susan.A.Alderson@maine.gov</u> Fax: 207-287-1039

It is the responsibility of the 9-1-1 Addressing Officer to contact the Bureau, to receive training on the online mapping program required. To schedule a time, please call 1-800-665-2830, or email <u>PUC.gis911@maine.gov</u>. Thank You.