

Emergency Telephone System Board
Of DuPage County
Policy and Procedures



Appendix G: Network Systems Access Request Form

TO: Emergency Telephone System Board 9-1-1 System Manager
FROM: Hinsdale Police Department
SUBJECT: Interface Request Form

Type of Interface (select one)

<input type="checkbox"/>	Real Time Interface
The current CAD system utilizes <i>Edge Frontier (Xalt Interface)</i> , which is designed to handle these types of interfaces. <i>Edge Frontier (Xalt Interface)</i> allows the applications to receive information without impacting the security and performance of the 9-1-1 System. An <i>Edge Frontier (Xalt Interface)</i> interface would be developed and maintained by Hexagon for all non-9-1-1 interfaces at the cost of the requesting agency.	
<input type="checkbox"/>	Other 9-1-1 System Component
This will require development and maintenance by a vendor for all non-ETSB 9-1-1 interfaces at the cost of the requesting agency. Requestor should list the type of interface needed (real time, API etc).	
<input checked="" type="checkbox"/>	Asynchronous Interface
For this type of interface, a secondary archive server will be utilized to provide the data requested. This data provided is not real time.	

With the submission of this form, I confirm that I reviewed and understand the DuPage ETSB Information Technology and Network Security Policy, Policy No: 911-013, [the "Policy"]. I understand that an MOU will be required and there may be fees and costs involved for any interface that is not 9-1-1 related.

 Signature
 Brian King

 Print Name of Agency Head

04/15/2026

 Date:

Please include a short description or attach a copy to this request for the following:

- **Technical Requirements:** (will also be reviewed by Tech Focus Group)
 AXON Auto-Tagging Service
- **Desired Project Implementation Schedule:** (include/attach a go-live goal or schedule)
 As Soon As Possible
- **Vendor Service Level Agreement (SLA)** (It is important that ETSB know the hours of work)

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Agency:	Hinsdale Police Department
Agency Contact:	Grant McElroy
Email:	gmcelroy@villageofhinsdale.org
Cellphone:	(630) 649-1521
IT Administrator:	Orbis Solutions
Cellphone:	(630) 789-7050
Email:	helpdesk@villageofhinsdale.org
Vendor Name:	Axon
Contact:	Support
Cellphone:	
Email:	customerservice@axon.com
Interface:	AXON Auto-Tagging Service

Internal Review

Recommendation:

Yes = Support of Request

No = Oppose Supporting the Request. (a No Recommendation will provide a brief summary of the opposition to the ETS Board submitted via the 9-1-1 System Coordinator)

Yes No

Tech Focus Group Recommendation

Technical Requirements received

Project Implementation Schedule received

Vendor SLA received

9-1-1 System Manager

MOU executed

ETS Board Approved: _____ Chair's Initials: _____

Date