



Emergency Telephone System Board Of DuPage County Evaluation Request Form

TO: Emergency Telephone System Board 9-1-1 System Coordinator
FROM: Brian Lindstrom-Records Supervisor, Addison Police Department
DATE: January 10, 2024
SUBJECT: Interface Request

Request: Axon interface to the Hexagon Archive Database.

Background: (Please include any supporting documentation for consideration and systems affected)
Previously submitted by Axon business analyst and Mike Sampey - Village of Addison IT Manager.
Addison Police Department is under agreement with Axon for future RMS build.

Budget Impact: (If costs are unknown, please mark them to be determined. By submitting an evaluation request form the requestor acknowledges they may be obligated for cost of the interface.)

To be determined.

Technical Requirements: (will also be reviewed by Tech Focus Group)
See "Background" above.

Project Implementation Schedule:
Go-Live goal between June 1 - July 1 2024

Future Impact Consideration:
To be determined, see "Background" above for consideration of systems affected.

I have read ETSB 911-018: 9-1-1 System Administration and 911-013: Information Technology and Network Security Policy and believe this request complies with these policies.

Brian Lindstrom
Print Name

Signature

Recommendation:

Yes = Support of Request
No = Oppose Supporting the Request (A representative group providing a No Recommendation may provide a brief summary of the opposition to the ETS Board submitted via the 9-1-1 System Coordinator)

Yes	No	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Tech Focus Group
<input checked="" type="checkbox"/>	<input type="checkbox"/>	PSAPs Directors: ACDC, DU-COMM
<input checked="" type="checkbox"/>	<input type="checkbox"/>	DuPage Fire Chiefs Association - Standardization Committee
<input type="checkbox"/>	<input type="checkbox"/>	DuPage Chiefs of Police Association - Standardization Committee
<input type="checkbox"/>	<input type="checkbox"/>	Policy Advisory Committee (PAC)
<input type="checkbox"/>	<input type="checkbox"/>	9-1-1 System Coordinator
<input type="checkbox"/>	<input type="checkbox"/>	ETS Board

Approved: _____
Date

Chairman's Initials: _____