

**STARCOM21 OVERSIGHT COMMITTEE**  
**System GATEWAY Access Application**

**Completion Instructions**

The attached application form is intended to provide the STARCOM21 Oversight Committee, and its Advisory Subcommittee, with the pertinent information necessary to determine if an agency is eligible to participate on the STARCOM21 network via use of gateway interface connectivity.

**Overview of Purpose for Communications Capability:**

Provide a general description of your agency's communications requirements.

**Agency Name/Description:**

Include a description of the type of services provided, agency jurisdiction location, headquarters location, field office locations, number of radio units currently assigned and working in each/number of STARCOM21 mobiles, portables, consoles, control stations, etc. proposed for each location.

**Existing Communications Capabilities:**

Will existing communications capabilities be maintained, or is STARCOM21 replacing existing equipment?

**Estimated traffic counts:**

Estimate of traffic that will be generated. Identify standards used – per unit per day average, total agency per month, etc.

**Agency Requirements:**

Identify anticipated communications uses, i.e. unit to unit, agency dispatch, dispatch by another agency, roaming requirements, anticipated equipment identification – portable, mobile, VRS, console, etc. If emergency alert button is to be activated – where will the notification be monitored/processed?

**Interoperability Requirements:**

Identify anticipated interoperability requirements: incident based and/or routine in nature? How much traffic will be generated? Agencies involved, purpose and duration of traffic, etc.

**Geographic Range or Scope of Communications Capabilities**

Identify or explain the geographic range of communications requirements; i.e. local area, regional, statewide, etc. Provide an estimated break-down of percentage of use by each type of geographical description appropriate – as an example, "Based on historical data, we anticipate that 85% or more of our agency's radio traffic will originate from within the radio user's primary assignment county; units providing assistance to another officer within a five-county region may account for an additional 10% of their traffic, with the remaining 5% or less due to occasional travel out of their geographic region, such as to Springfield or the Metro East area."

**Benefit for Initiator:**

Describe the benefits you expect to receive from use of STARCOM21?

**Impact on other Agencies:**

Describe the impact your agency's participation on STARCOM21 will have on other agencies on the system.

**Narrative:**

Please include any additional information which may be useful to the members of the Oversight Committee in their consideration of your application.

***For applications relating to the use of a Gateway in conjunction with STARCOM21; please complete the following:***

***Statement of the purpose of the Gateway, and Operational Requirements associated with its use.***

Examples include, but are not limited to, emergency inter-operation, provision of backup in case of the failure of one system, and provision of access to features now available on one of the networks [such as statewide roaming].

***Technical description of the proposed Gateway.***

The technical description provided must include diagrams or schematics describing how the Gateway will operate. The description must indicate if the Gateway will operate full-time or part-time [emergency only]. If the Gateway is to be utilized in a part-time fashion, policies governing the use of the Gateway must be included. Control of Gateway activation and de-activation must be described and explained.

***Local Policies Governing Use:***

Include copies of your tactical interoperability communications plans and all other locally-developed technical and operational policies and procedures that will govern the use of the Gateway.

***Gateway Traffic Study.***

The agency seeking the Gateway must provide documentation of the amount of traffic that will be impacting the STARCOM21 network, including how the traffic levels will vary, by hour, and what geographical distribution the traffic will require once attached to the STARCOM21 network.

**STARCOM21 OVERSIGHT COMMITTEE**  
**Access Application Documentation (Gateway)**

**Initiative Title -** \_\_\_\_\_  
**Agency Contact-** \_\_\_\_\_

**Name:** \_\_\_\_\_  
**Agency:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Issue Definition:** Application for Use of STARCOM21 by \_\_\_\_\_

Requesting Agency Information Summary		Provide Detailed Information in the Narratives Section
<b>Gateway Type:</b>		<b>Definition</b>
<b>G1</b>	Console Patch	Patching two or more radios via built-in Dispatch Console functionality
<b>G2</b>	Stand-Alone Patch Device	Patching two or more radios with stand-alone patch equipment
<b>G3</b>	Gateway System	Connecting two or more systems or system controllers with permanent control and audio links
<b>G4</b>	<b>Device Make and Model</b>	
<b>G5</b>	<b>Fixed or Mobile</b>	<b>F / M</b>
	<b>Proposed Usage</b>	<b>CHECK BOX</b>
<b>G6</b>	Daily / Permanent	<b>Estimated Frequency and Duration of Use</b>
<b>G7</b>	Regular Events / Incidents	
<b>G8</b>	Emergency / Disaster Only	
<b>G9</b>	<b>List the Agencies you are proposing to patch / gateway to</b>	<b>How Often</b>
	<b>Geographic Area: Check One Only</b>	<b>Check Box</b>
<b>G10</b>	Statewide	Counties or Region:
<b>G11</b>	Multiple Counties or Regional	
<b>G12</b>	Single County	County:
	<b>State actual numbers and the type of measurement:</b>	<b>(ex: PTT/HR total, PTT/Day per user, Airtime per hour / day / year, or any similar type of data)</b>
<b>T1</b>	Radio Traffic Study / Estimates	
<b>Advisory Subcommittee Use Only</b>		<b>Date &amp; Comments</b>
<b>A1</b>	Qualified User	<b>Y / N</b>
<b>A2</b>	Motorola GOS	<b>Y / N</b>
<b>A3</b>	Current TICP	<b>Y / N</b>
<b>A4</b>	Approved Use	<b>Y / N</b>

**NARRATIVES:**

***Overview of Purpose for Communications Capability:***

***Agency Name/Description:***

***Existing Communications Capabilities:***

***Estimated traffic counts:***

***Agency Requirements:***

***Interoperability Requirements:***

***Geographic Range or Scope of Communications Capabilities***

***Benefit for Initiator:***

***Impact on other Agencies:***

***Narrative:***

***For applications relating to the use of a Gateway in conjunction with STARCOM21; please complete the following:***

***Statement of the purpose of the Gateway and Operational Requirements.***

***Technical description of the proposed Gateway.***

***Local Policies Governing Use:***

***Gateway Traffic Study.***

***By signature below, applicant agrees to:***

- 1. Provide all personnel accessing/using STARCOM21 radios with training on the use of the radio equipment and communications procedures;***
- 2. Adhere to the policies and procedures as defined by the STARCOM21 Oversight Committee;***
- 3. Adhere to the provisions of, and promote the utilization of, the Statewide Communications Interoperability Plan; and***
- 4. Adhere to the policies and procedures of ISPERN, IREACH, and other statewide networks as may be applicable.***
- 5. Include the State Interoperability Template in the programming of all radios.***

***Signature:*** \_\_\_\_\_

***Date:*** \_\_\_\_\_

***Name Printed:*** \_\_\_\_\_