

**State 911 Committee
APPLICATION FOR PUBLIC ACT NO. 32
PRIMARY PUBLIC SAFETY ANSWERING POINT
DISPATCHER TRAINING DISTRIBUTION**

DISTRIBUTION YEAR - 2015		EXPENDITURE PERIOD FOR 2015 FUNDS ENDS 12/31/2017	
1. PRIMARY PSAP NAME			
2a. MAILING ADDRESS			
2b. REMITTANCE ADDRESS			
3. FEDERAL ID NUMBER		4. ORI NUMBER	

5. COUNTY IDENTIFYING THIS PRIMARY PSAP IN ITS 911 PLAN:

ELIGIBLE PERSONNEL	
6. TOTAL NUMBER OF PAID HOURS IN 2014 (Enter total from the DTS-101W Eligible Employee Worksheet)	
7. FTEs (Item 6 divided by 2,080)	

By signature, the authorized officials certify that all information contained in the registration documents are accurate. *Misrepresentation to obtain funds under this program constitutes fraud and is punishable as a felony under Section 750.218 Michigan Compiled Laws.*

ORIGINAL SIGNATURES REQUIRED

8. CHIEF ADMINISTRATIVE OFFICER (NAME AND TITLE)	
ADDRESS	TELEPHONE
SIGNATURE	DATE

9. PRIMARY PSAP ADMINISTRATOR (NAME AND TITLE)		E-MAIL ADDRESS
ADDRESS	TELEPHONE	
SIGNATURE	DATE	

10. CHIEF FINANCIAL OFFICER (NAME AND TITLE)	
ADDRESS	TELEPHONE
SIGNATURE	DATE

This signature page must be received at the State 911 Office no later than 4 p.m. on Friday, February 6, 2015.

You may submit a copy of this page by

MAIL: Michigan State Police Headquarters
State 911 Office, Attention Ms. Theresa Hart
333 S. Grand Avenue, P.O. Box 30634
Lansing, Michigan 48909-0634

E-MAIL: SNCdispatchertraining@michigan.gov

FAX: (517) 241-0387 (please include a cover page to attention of Ms. Theresa Hart)

Authority: 1986, P.A. No. 32, as amended Completion: Voluntary Penalty: No funding w/o forms
