



California Radio Interoperable System - CRIS SYSTEM KEY REQUEST LETTER

| | SISILM KLI KLQULSI LLIILK | <u> </u> |
|---|---|------------------------------------|
| Date: | | |
| o: | psc.intake@caloes.ca.gov | |
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| From: | | |
| | | |
| Subject: | Request for Copy of a CRIS System Key | |
| | baraby raguants a copy of the C | alifornia Dadio Intereneralele |
| System ICR | hereby requests a copy of the Co IS) System Key be provided to | for use in programming radios for |
| use on the | • | as an |
| | and is qualified to program radio e | equipment. |
| | ls they must complete a background check (Live | Scan) administered and approved |
| by the Calit | fornia Governor's Office of Emergency Services. | |
| | hereby acknowledges and accepts the te | erms and conditions for use of the |
| CRIS System Key contained in the Policy for System Key Access attached to this request or see | | |
| System Key | y policy at <u>www.caloes.ca.gov/CRIS</u> and hereby i | |
| hereby acknowledges_and accepts_that any amendments made to the Policy for System Key Access by the CRIS in its sole discretion, shall be incorporated by | | |
| eference without need for amendment to this request, and hereby | | |
| understands and agrees to abide by such amended terms and conditions. Any amendments to | | |
| hese terms | and conditions will be immediately provided by | the CRIS to and |
| | • | |
| By signing b | pelow, and | hereby understand and |
| agree to abide by all of the terms and conditions set forth above. | | |
| | | |
| | | |
| Sianature 1 | Authorized Programming Employee) | Date |
| oigilalolo (| , to menze a megramming employee; | Date |
| | | |
| Signature (| Employee Supervisor) | Date |
| Cl 1/ | | |
| System Key | ✓ □ Authorized □ Not Authorized | |
| | | |
| Cal OES/PS | SC Approval Signature Date | |
| | | _, |

Requires Signature of either: Assistant Director (Cal OES/PSC)

Cal OES/PSC Branch Manager

Supervising Telecommunications Engineer (RPDU)

REV 09/2024 OES-PSC-603