

**Douglas A. Ducey**  
Governor



**Andy Tobin**  
Director

**ARIZONA DEPARTMENT OF ADMINISTRATION**

Office of Grants and Federal Resources  
100 NORTH FIFTEENTH AVENUE • SUITE 305  
PHOENIX, ARIZONA 85007  
(602) 542-1500

June 7, 2019

Lisa M. Fowlkes  
Chief, Public Safety and Homeland Security Bureau  
Federal Communications Commission (FCC)  
Washington, DC 20554

Via email by request to: [911feereport@fcc.gov](mailto:911feereport@fcc.gov)

RE: Annual Information Collection as Mandated by the New and Emerging Technologies Improvement Act of 2008

Dear Chief Fowlkes,

Please find attached the Arizona 9-1-1 Fee Report for calendar year 2018. The report reflects the activities and expenditures to enhance 9-1-1 services in the state as well as planned activities to deploy a NG9-1-1 solution statewide. We appreciate the opportunity to support the FCC with its efforts to comply with Section 6(f)(2) of the NET911 Act.

If you have any questions or need additional information regarding the report, please do not hesitate to contact me or Karen Ziegler, Public Safety Program Manager at 602-542-6032 or [karen.ziegler@azdoa.gov](mailto:karen.ziegler@azdoa.gov).

Sincerely,

A handwritten signature in cursive script that reads "Matthew Hanson".

Matthew Hanson  
Assistant Director  
Arizona 9-1-1 Administrator



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Washington, D.C. 20554

Approved by OMB  
3060-1122  
Expires: March 31, 2021  
Estimated time per response: 10-55  
hours

Annual Collection of Information

Related to the Collection and Use of 911 and E911 Fees by States and Other Jurisdictions

Pursuant to OMB authorization 3060-1122, the FCC's Public Safety and Homeland Security Bureau seeks the following specific information in order to fulfill the Commission's obligations under Section 6(f)(2) of the NET 911 Act:

**A. Filing Information**

**1. Name of State or Jurisdiction**

| State or Jurisdiction |
|-----------------------|
| ARIZONA               |

**2. Name, Title and Organization of Individual Filing Report**

| Name           | Title              | Organization                    |
|----------------|--------------------|---------------------------------|
| Matthew Hanson | Assistant Director | AZ Department of Administration |



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**B. Overview of State or Jurisdiction 911 System**

1. Please provide the total number of active Public Safety Answering Points (PSAPs) in your state or jurisdiction that receive funding derived from the collection of 911/E911 fees during the annual period ending December 31, 2018:

| PSAP Type <sup>1</sup> | Total     |
|------------------------|-----------|
| Primary                | 74        |
| Secondary              | 10        |
| <b>Total</b>           | <b>84</b> |

2. Please provide the total number of active telecommunicators<sup>2</sup> in your state or jurisdiction that were funded through the collection of 911 and E911 fees during the annual period ending December 31, 2018:

| Number of Active Telecommunicators | Total |
|------------------------------------|-------|
| Full-Time                          | 0     |
| Part-time                          | 0     |

3. For the annual period ending December 31, 2018, please provide an estimate of the total cost to provide 911/E911 service in your state or jurisdiction.

<sup>1</sup> A Primary PSAP is one to which 911 calls are routed directly from the 911 Control office. A secondary PSAP is one to which 911 calls are transferred from a Primary PSAP. See National Emergency Number Association, Master Glossary of 9-1-1 Terminology (*Master Glossary*), Apr. 13, 2018, at 162, available at [https://cdn.ymaws.com/www.nena.org/resource/resmgr/standards/NENA-ADM-000.22-2018\\_FINAL\\_2.pdf](https://cdn.ymaws.com/www.nena.org/resource/resmgr/standards/NENA-ADM-000.22-2018_FINAL_2.pdf).

<sup>2</sup> A telecommunicator, also known as a call taker or a dispatcher, is a person employed by a PSAP who is qualified to answer incoming emergency telephone calls and/or who provides for the appropriate emergency response either directly or through communication with the appropriate PSAP. See *Master Glossary* at 192.



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|                       |              |
|-----------------------|--------------|
| <b>Amount</b><br>(\$) | \$17,364,937 |
|-----------------------|--------------|

3a. If an amount cannot be provided, please explain why.

|     |
|-----|
| N/A |
|-----|

4. Please provide the total number of 911 calls your state or jurisdiction received during the period January 1, 2018 to December 31, 2018.

| Type of Service | Total 911 Calls  |
|-----------------|------------------|
| Wireline        | 604,624          |
| Wireless        | 3,557,435        |
| VoIP            | 49,427           |
| Other           | 161,471          |
| <b>Total</b>    | <b>4,372,957</b> |

**C. Description of Authority Enabling Establishment of 911/E911 Funding Mechanisms**

1. Has your State, or any political subdivision, Indian tribe, village or regional corporation therein as defined by Section 6(f)(1) of the NET 911 Act, established a funding mechanism designated for or imposed for the purposes of 911 or E911 support or implementation (please include a citation to the legal authority for such mechanism)? *Check one.*

- Yes .....
- No .....



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**1a. If YES, provide a citation to the legal authority for such a mechanism.**

Pursuant to A.R.S. §41-704, the Director of the Arizona Department of Administration (ADOA) is required to:

- Adopt rules and procedures for the administering and disbursing monies deposited in the Emergency Telecommunication Services Revolving Fund;
- Review and approve, at least quarterly, requests by political subdivisions for payment for operating emergency telecommunication service systems;
- Bi-annually recommend to the Arizona Legislature the amount the Telecommunication Services Excise Tax that will be required to support the implementation of the State's 9-1-1 program; and
- Administer the Emergency Telecommunication Services Revolving Fund.

The administration of the State's 9-1-1 program, including how the collected funds are made available to localities, written criteria regarding the allowable uses of the collected funds and procedures for the disbursement of funds, is governed by rules adopted by ADOA pursuant to the Arizona Administrative Code. These rules, which became effective June 22, 1985, consist of Section R2-1-401 through R2-1-411 of the Arizona Administrative Code are as follows:

R2-1-401 Definitions

R2-1-402 Establishment of 9-1-1 Planning Committee

R2-1-403 Submission of Service Plan

R2-1-404 Certificate of Service Plan Approval

R2-1-405 Resubmitting of Service Plan

R2-1-406 Modification of an Approved Service Plan

R2-1-407 9-1-1 System Design Standards

R2-1-408 9-1-1 Operational Requirements

R2-1-409 Funding Eligibility

R2-1-410 Method of Reimbursement

R2-1-411 Allocation of Funds

The Director of ADOA has the authority to approve the expenditure of funds collected for 9-1-1 or E9-1-1 purposes. The State 9-1-1 Program staff annually reviews and approves budgets for each political subdivision eligible for funding pursuant to the statute and rules.



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Pursuant to A.R.S. §41-704, ninety-five percent of the Emergency Telecommunication Services Revolving Fund must be distributed to political subdivisions of the state for the purpose of emergency telecommunication (9-1-1) services. Funding supports monthly recurring costs for maintenance and operating expenditures as well as capital expenditures for equipment.

The statute also allows for payment of the carriers' costs associated with the provisioning, development, design, construction and maintenance of wireless emergency telecommunication services.

ADOA is authorized to use up to two-thirds of five percent deposited annually in the Emergency Telecommunication Services Revolving Fund for administrative costs. The remainder of the five percent may be allocated for local network management of contracts with Public Safety Answering Points (PSAPs) for emergency telecommunication services.

**1b. If YES, during the annual period January 1, 2018 to December 31, 2018, did your state or jurisdiction amend, enlarge, or in any way alter the funding mechanism.**

No

**2. Which of the following best describes the type of authority arrangement for the collection of 911/E911 fees? Check one.**

- The State collects the fees .....
- A Local Authority collects the fees .....
- A hybrid approach where two or more governing bodies  
(e.g., state and local authority) collect the fees .....



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**3. Describe how the funds collected are made available to localities.**

The State 9-1-1 Program establishes the program size for the year based on the projected revenues received in the Emergency Telecommunication Services Revolving Fund. A Notice of Funding Availability (NOFA) is announced and 9-1-1 Systems that have an approved Service Plan submit budget proposals for eligible expenses to support the PSAPs in their system.

Through a non-competitive grant process, funds are allocated to 9-1-1 systems and obligated through a grant agreement between the State 9-1-1 Program and the 9-1-1 System. 9-1-1 Systems submit monthly reimbursement requests to the State 9-1-1 Program for eligible expenses. The State 9-1-1 Program reviews and approves the request and issues a payment to the 9-1-1 System in accordance with the statute, rules and approved budget.



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**D. Description of State or Jurisdictional Authority That Determines How 911/E911 Fees are Spent**

| <b>1. Indicate which entities in your state have the authority to approve the expenditure of funds collected for 911 or E911 purposes.</b>                                                   |                                                          |                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------|
| Jurisdiction                                                                                                                                                                                 | Authority to Approve Expenditure of Funds<br>(Check one) |                                     |
|                                                                                                                                                                                              | Yes                                                      | No                                  |
| State                                                                                                                                                                                        | <input checked="" type="checkbox"/>                      | <input type="checkbox"/>            |
| Local<br>(e.g., county, city, municipality)                                                                                                                                                  | <input type="checkbox"/>                                 | <input checked="" type="checkbox"/> |
| <b>1b. Please briefly describe any limitations on the approval authority per jurisdiction (e.g., limited to fees collected by the entity, limited to wireline or wireless service, etc.)</b> |                                                          |                                     |
|                                                                                                                                                                                              |                                                          |                                     |

**2. Has your state established a funding mechanism that mandates *how* collected funds can be used? Check one.**

- Yes .....
- No .....

**2a. If you checked YES, provide a legal citation to the funding mechanism of any such criteria.**

A.R.S. §41-704 – Emergency Telecommunication Services; Administration; Revolving Fund





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**2b. If you checked NO, describe how your state or jurisdiction decides how collected funds can be used.**

N/A

**Description of Uses of Collected 911/E911 Fees**

- 1. Provide a statement identifying with specificity all activities, programs, and organizations for whose benefit your state, or political subdivision thereof, has obligated or expended funds collected for 911 or E911 purposes and how these activities, programs, and organizations support 911 and E911 services or enhancements of such services.**

There are 84 Public Safety Answering Points (PSAPs) in Arizona that are eligible for 9-1-1 funding from the Emergency Telecommunication Services Revolving Fund. During the annual period ending December 31, 2018, funds were expended for 9-1-1 equipment upgrades, 9-1-1 equipment maintenance and 9-1-1 network services, including NG9-1-1 implementation and ongoing expenses. Funds were also expended for the wireless carriers' costs associated with the deployment and maintenance of wireless E9-1-1 Phase II.

Fourteen PSAPs deployed a NG9-1-1 Managed Services solution in 2018 bringing the total number of PSAPs on a NG9-1-1 Managed Services solution to thirty-nine. An additional twenty-six PSAPs in the MR9-1-1 System deployed a NG9-1-1 solution. The State 9-1-1 Program also continued to support PSAPs on legacy systems that have not transitioned to a NG9-1-1 solution.



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| <b>2. Please identify the allowed uses of the collected funds. Check all that apply.</b> |                                                                                                 |                                                               |                                     |
|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------------------------------|
| <b>Type of Cost</b>                                                                      |                                                                                                 | <b>Yes</b>                                                    | <b>No</b>                           |
| <b>Operating Costs</b>                                                                   | Lease, purchase, maintenance of customer premises equipment (CPE) (hardware and software)       | <input checked="" type="checkbox"/>                           | <input type="checkbox"/>            |
|                                                                                          | Lease, purchase, maintenance of computer aided dispatch (CAD) equipment (hardware and software) | <input type="checkbox"/>                                      | <input checked="" type="checkbox"/> |
|                                                                                          | Lease, purchase, maintenance of building/facility                                               | <input type="checkbox"/>                                      | <input checked="" type="checkbox"/> |
| <b>Personnel Costs</b>                                                                   | Telecommunicators' Salaries                                                                     | <input type="checkbox"/>                                      | <input checked="" type="checkbox"/> |
|                                                                                          | Training of Telecommunicators                                                                   | <input type="checkbox"/>                                      | <input checked="" type="checkbox"/> |
| <b>Administrative Costs</b>                                                              | Program Administration                                                                          | <input checked="" type="checkbox"/>                           | <input type="checkbox"/>            |
|                                                                                          | Travel Expenses                                                                                 | <input checked="" type="checkbox"/>                           | <input type="checkbox"/>            |
| <b>Dispatch Costs</b>                                                                    | Reimbursement to other law enforcement entities providing dispatch                              | <input type="checkbox"/>                                      | <input checked="" type="checkbox"/> |
|                                                                                          | Lease, purchase, maintenance of Radio Dispatch Networks                                         | <input type="checkbox"/>                                      | <input checked="" type="checkbox"/> |
| <b>Grant Programs</b>                                                                    | NG9-1-1 Data Improvement Project (NDIP)                                                         | <input checked="" type="checkbox"/><br><b>If YES, see 2a.</b> | <input type="checkbox"/>            |
|                                                                                          |                                                                                                 |                                                               |                                     |



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**2a. During the annual period ending December 31, 2018, describe the grants that your state paid for through the use of collected 911/E911 fees and the purpose of the grant.**

The NG9-1-1 Data Improvement Project (NDIP) is designed to assist the 9-1-1 Systems across the state migrate their Geographic Information System (GIS) data sets to a database structure (schema) congruent with the coming Next Generation 9-1-1 (NG9-1-1) systems.

**E. Description of 911/E911 Fees Collected**

| <b>1. Please describe the amount of the fees or charges imposed for the implementation and support of 911 and E911 services. Please distinguish between state and local fees for each service type.</b> |                                                                                                         |                                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>Service Type</b>                                                                                                                                                                                     | <b>Fee/Charge Imposed</b>                                                                               | <b>Jurisdiction Receiving Remittance<br/>(e.g., state, county, local authority, or a combination)</b> |
| Wireline                                                                                                                                                                                                | \$.20 per month for each activated wireline service account                                             | State                                                                                                 |
| Wireless                                                                                                                                                                                                | \$.20 per month for each activated wireless service account                                             | State                                                                                                 |
| Prepaid Wireless                                                                                                                                                                                        | .80 of one percent from the retail sale of wireless services. Retailer can retain 3% prior to submittal | State                                                                                                 |
| Voice Over Internet Protocol (VoIP)                                                                                                                                                                     | Same as wireline service account                                                                        | State                                                                                                 |
| Other                                                                                                                                                                                                   | None                                                                                                    | -                                                                                                     |



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2. For the annual period ending December 31, 2018, please report the total amount collected pursuant to the assessed fees or charges described in Question F 1.

| Service Type                        | Total Amount Collected (\$)                                                           |
|-------------------------------------|---------------------------------------------------------------------------------------|
| Wireline                            | \$14,406,263.64                                                                       |
| Wireless                            | Arizona Department of Revenue (ADOR) combines wireline, wireless and VoIP collections |
| Prepaid Wireless                    | \$1,594,388.64                                                                        |
| Voice Over Internet Protocol (VoIP) | Arizona Department of Revenue (ADOR) combines wireline, wireless and VoIP collections |
| Other - Interest                    | \$126,752.64                                                                          |
| <b>Total</b>                        | <b>\$16,127,404.92</b>                                                                |

- 2a. If an amount cannot be provided, please explain why.

N/A

3. Please identify any other sources of 911/E911 funding.

None



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| Question                                                                                                                                                                                                                                                                                                              | Yes                      | No                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| <b>4. For the annual period ending December 31, 2018, were any 911/E911 fees that were collected by your state or jurisdiction combined with any federal, state or local funds, grants, special collections, or general budget appropriations that were designated to support 911/E911/NG911 services? Check one.</b> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>4a. If YES, please describe the federal, state or local funds and amounts that were combined with 911/E911 fees.</b>                                                                                                                                                                                               |                          |                                     |
| N/A                                                                                                                                                                                                                                                                                                                   |                          |                                     |

| 5. Please provide an estimate of the proportional contribution from each funding source towards the total cost to support 911 in your state or jurisdiction. | Percent |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
| State 911 Fees                                                                                                                                               | 100%    |
| Local 911 Fees                                                                                                                                               | 0       |
| General Fund - State                                                                                                                                         | 0       |
| General Fund - County                                                                                                                                        | 0       |
| Federal Grants                                                                                                                                               | 0       |
| State Grants                                                                                                                                                 | 0       |



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**F. Description of Diversion or Transfer of 911/E911 Fees for Other Uses**

| Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                    | Yes                                 | No                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
| <b>1. In the annual period ending December 31, 2018, were funds collected for 911 or E911 purposes in your state or jurisdiction made available or used solely for the purposes designated by the funding mechanism? <i>Check one.</i></b>                                                                                                                                                                                                                                                                                                           |                                                                                                                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>1a. If NO, please identify what amount of funds collected for 911 or E911 purposes were made available or used for any purposes other than the ones designated by the funding mechanism or used for purposes otherwise unrelated to 911 or E911 implementation or support, including any funds transferred, loaned, or otherwise used for the state's general fund. Along with identifying the amount, please include a statement identifying the non-related purposes for which the collected 911 or E911 funds were made available or used.</b> |                                                                                                                    |                                     |                          |
| <b>Amount of Funds (\$)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Identify the non-related purpose(s) for which the 911/E911 funds were used. <i>(Add lines as necessary)</i></b> |                                     |                          |
| N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                    |                                     |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                    |                                     |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                    |                                     |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                    |                                     |                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                    |                                     |                          |



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**G. Oversight and Auditing of Collection and Use of 911/E911 Fees**

| Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Yes                                 | No                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
| <b>1. Has your state established any oversight or auditing mechanisms or procedures to determine whether collected funds have been made available or used for the purposes designated by the funding mechanism or otherwise used to implement or support 911? Check one.</b>                                                                                                                                                                                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>1a. If YES, provide a description of the mechanisms or procedures and any enforcement or other corrective actions undertaken in connection with such auditing authority, for the annual period ending December 31, 2018. (Enter "None" if no actions were taken.)</b>                                                                                                                                                                                                                                                                                                                                   |                                     |                          |
| <p>The State 9-1-1 Program reviews and approves budget proposals from each 9-1-1 Systems and PSAP. 9-1-1 system administrators certify and submit invoices to the State 9-1-1 Program for payment against their approved budget. State 9-1-1 Program staff reviews and invoices for accuracy and eligibility based on the purposes designated in the statute and rules. In addition, the State 9-1-1 Program has a program compliance manager that conducts compliance reviews of 9-1-1 Systems and PSAPs.</p> <p>The State 9-1-1 Program is subject to audit by the Arizona Auditor General's Office.</p> |                                     |                          |

| Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Yes                                 | No                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
| <b>2. Does your state have the authority to audit service providers to ensure that the amount of 911/E911 fees collected from subscribers matches the service provider's number of subscribers? Check one.</b>                                                                                                                                                                                                                                                                                                                                                                                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>2a. If YES, provide a description of any auditing or enforcement or other corrective actions undertaken in connection with such auditing authority, for the annual period ending December 31, 2018. (Enter "None" if no actions were taken.)</b>                                                                                                                                                                                                                                                                                                                                                |                                     |                          |
| <p>The State 9-1-1 Program collects data from the operating telephone companies on the number and type of exchange access lines in each telephone exchange area and the amount of 9-1-1 excise tax generated in each telephone exchange area in each county. The program also collects data from each wireless service provider on the number of activated wireless service lines within the state and the amount of 9-1-1 tax generated. The data collected from the reports are sent to the AZ Department of Revenue to validate against the excise tax revenue received from the providers.</p> |                                     |                          |



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**H. Description of Next Generation 911 Services and Expenditures**

| Question                                                                                                                                                                             | Yes                                 | No                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
| <b>1. Does your state or jurisdiction classify expenditures on Next Generation 911 as within the scope of permissible expenditures of funds for 911 or E911 purposes? Check one.</b> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>1a. If YES, in the space below, please cite any specific legal authority:</b>                                                                                                     |                                     |                          |
| <p>A.R.S. §41-704 – Emergency Telecommunication Services; Administration; Revolving Fund</p>                                                                                         |                                     |                          |

| Question                                                                                                                                           | Yes                                 | No                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|
| <b>2. In the annual period ending December 31, 2018, has your state or jurisdiction expended funds on Next Generation 911 programs? Check one.</b> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <b>2a. If YES, in the space below, please enter the dollar amount that has been expended.</b>                                                      |                                     |                          |
| <b>Amount<br/>(\$)</b>                                                                                                                             | \$3,829,669.59                      |                          |





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| <b>3. For the annual period ending December 31, 2018, please describe the type and number of NG911 Emergency Service IP Network(s) (ESInets) that operated within your state.</b> |                                     |                                     |                                                                                                                          |                                                                                           |                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-------------------------------------|
| Type of ESInet                                                                                                                                                                    | Yes                                 | No                                  | If Yes, Enter Total PSAPs Operating on the ESInet                                                                        | If Yes, does the type of ESInet interconnect with other state, regional or local ESInets? |                                     |
|                                                                                                                                                                                   |                                     |                                     |                                                                                                                          | Yes                                                                                       | No                                  |
| a. A single, state-wide ESInet                                                                                                                                                    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                          | <input type="checkbox"/>                                                                  | <input type="checkbox"/>            |
| b. Local (e.g., county) ESInet                                                                                                                                                    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |                                                                                                                          | <input type="checkbox"/>                                                                  | <input type="checkbox"/>            |
| c. Regional ESInets                                                                                                                                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | [If more than one Regional ESInet is in operation, in the space below, provide the total PSAPs operating on each ESInet] | <input type="checkbox"/>                                                                  | <input type="checkbox"/>            |
| Name of Regional ESInet:                                                                                                                                                          |                                     |                                     | Maricopa Region 9-1-1 (MR911)                                                                                            | <input type="checkbox"/>                                                                  | <input checked="" type="checkbox"/> |
| Name of Regional ESInet:                                                                                                                                                          |                                     |                                     | CenturyLink NG911 ESInet                                                                                                 | <input checked="" type="checkbox"/>                                                       | <input type="checkbox"/>            |



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**4. Please provide a description of any NG911 projects completed or underway during the annual period ending December 31, 2018.**

Fourteen PSAPs deployed a NG9-1-1 Managed Services solution in 2018 bringing the total number of PSAPs on a NG9-1-1 Managed Services platform to thirty-nine. An additional twenty-six PSAPs in the MR9-1-1 System deployed a NG9-1-1 solution. Five PSAPs are scheduled to deploy a NG9-1-1 Managed Services solution in 2019.

| Question                                                                                                                                       | Total PSAPs<br>Accepting Texts                             |
|------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>5. During the annual period ending December 31, 2018, how many PSAPs within your state implemented text-to-911 and are accepting texts?</b> | 26                                                         |
| Question                                                                                                                                       | Estimated Number of PSAPs<br>that will Become Text Capable |
| <b>6. In the next annual period ending December 31, 2019, how many PSAPs do you anticipate will become text capable?</b>                       | 58                                                         |



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**I. Description of Cybersecurity Expenditures**

| Question                                                                                                               | Check the appropriate box       |                                           | If Yes, Amount Expended (\$) |
|------------------------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------------------------|------------------------------|
| 1. During the annual period ending December 31, 2018, did your state expend funds on cybersecurity programs for PSAPs? | Yes<br><input type="checkbox"/> | No<br><input checked="" type="checkbox"/> |                              |

| Question                                                                                                                                                                                        | Total PSAPs |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 2. During the annual period ending December 31, 2018, how many PSAPs in your state either implemented a cybersecurity program or participated in a regional or state-run cybersecurity program? | 0           |

| Question                                                                                                                                                                                                                                                      | Yes                      | No                       | Unknown                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|-------------------------------------|
| 3. Does your state or jurisdiction adhere to the National Institute of Standards and Technology <i>Framework for Improving Critical Infrastructure Cybersecurity</i> (February 2014) for networks supporting one or more PSAPs in your state or jurisdiction? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |



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**J. Measuring Effective Utilization of 911/E911 Fees**

- 1. Please provide an assessment of the effects achieved from the expenditure of state 911/E911 or NG911 funds, including any criteria your state or jurisdiction uses to measure the effectiveness of the use of 911/E911 fees and charges. If your state conducts annual or other periodic assessments, please provide an electronic copy (*e.g.*, Word, PDF) of the latest such report upon submission of this questionnaire to the FCC or provide links to online versions of such reports in the space below.**

1. 100% of wireline and wireless access lines in Arizona have access to 9-1-1
2. 100% of wireline and wireless access lines with PSAP systems for which the state has approved 9-1-1 Service Plans have Enhanced 9-1-1 (E9-1-1)
3. 99% of access lines within approved PSAP systems have Wireless Phase II 9-1-1; however, there are areas in the state that still have WPH0 and WPH1
4. 81% of Arizona PSAPs are operating on a NG911 ESInet
5. 31% of Arizona PSAPs have Text to 9-1-1 capability