|  |  |
| --- | --- |
| Requesting Agency |  |
| Address |  |
| Address |  |
| City |  |
| Zip Code |  |
| County |  |
| Contact Person |  |
| Phone |  |
| email |  |

Do you currently have a CLEAN agreement with PSP?  YES  N

How many full time sworn officers?

How many part time sworn officer?

How many marked vehicles?

How many unmarked vehicles?

What is the maximum numbers of vehicles on patrol during a shift?

Is your agency part of the PCPA Accreditation program? YES  NO

Is your agency accredited? YES  NO

Does your agency use the PAVTN for training? YES  NO

I have read the Mobile ID project description and understand the requirements/

YES  NO