

Instructions for Nationwide and Non-Nationwide Carrier Aggregate Live 911 Call Data Reports
 OMB Control Number 3060-1210; current OMB approval valid through [add date]

Paperwork Reduction Act Statement

We have estimated that each response to this collection of information will take 2 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain the required data, and complete and review the form or response. Response to this collection of information is mandatory for CMRS providers pursuant to 47 C.F.R. § 20.18(i)(3)(ii). CMRS providers may request confidential treatment of live 911 call data reports, but the Commission reserves the right to release aggregate or anonymized data on a limited basis to facilitate compliance with its rules. If you have comments on the estimate of how long it will take to complete this form, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Paperwork Reduction Project (3060-1210), Washington, DC 20554. We will also accept your comments via the Internet if you send them to pra@fcc.gov. Please DO NOT SEND COMPLETED REPORTS TO THIS ADDRESS. Remember - you are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and includes this notice.

THE FOREGOING NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, P.L. 104-13, OCTOBER 1, 1995, 44 U.S.C. 3507.

Nationwide Carriers

Section A	Test City	For each "Test City," click on the appropriate tab at the bottom of the template page to submit aggregate live 911 call data for that city.
	Reporting Period	For "Reporting Period," identify the calendar year quarter or quarters that the report covers.
Section B	Total Call Information	For "Total Call Information," insert the total of all live 911 calls. If any category of 911 calls is excluded from the total, use Section E (Exclusions) to identify the excluded category and the number of calls excluded.
Section C	Reporting by Technology	For "Reporting by Technology," enter each position technology or combination of technologies used, e.g., A-GPS, A-GNSS, OTDOA, UTDOA, AFLT, RTT, etc. If dispatchable location is used for location of any 911 calls, enter "Dispatchable Location" in this field.
	Yield	For "Yield (%)," enter the percentage of total 911 calls that result in dispatchable location or x/y location information by morphology and position technology.
Section D	Reporting by Morphology	For "Reporting by Morphology," enter the total calls for each morphology within the Test City
Section E	Exclusions	If any category of 911 calls is excluded from the compilation of live 911 call data, identify the excluded category and the number of calls excluded under that category.

Non-Nationwide Carriers

Section A	Test City	For "Reporting Region," identify the region for which live 911 call data is being reported, as applicable to the provider: (1) the single Test City served, if only one; (2) if more than one Test City, half of the Test Cities served (as selected and identified by the provider); (3) the largest county by population within the provider's footprint if the provider does not provide service in any Test City.
	Reporting Period	For "Reporting Period," identify the calendar year quarter or quarters that the report covers.
Section B	Total Call Information	For "Total Call Information," insert the total of all live 911 calls. If any category of 911 calls is excluded from the total, use Section E (Exclusions) to identify the excluded category and the number of calls excluded.

Section C	Reporting by Technology	For "Reporting by Technology," enter each position technology or combination of technologies used, e.g., A-GPS, A-GNSS, OTDOA, UTDOA, AFLT, RTT, etc. If dispatchable location is used for location of any 911 calls, enter "Dispatchable Location" in this field.
	Yield	For "Yield (%)," enter the percentage of total 911 calls that result in dispatchable location or x/y location information by morphology and position technology.
Section D	Reporting by Morphology	For "Reporting by Morphology," if the provider's footprint covers only one of the morphologies, submit the aggregate data only for that morphology. If the provider's footprint covers more than one morphology, include in the "Combined" row the aggregate live 911 call data for a sufficient number of representative counties to cover each morphology and identify that number of counties.
Section E	Exclusions	If any category of 911 calls is excluded from the compilation of live 911 call data, identify the excluded category and the number of calls excluded under that category.

Nationwide Carrier Live 911 Call Reporting Form

Test City: Atlanta

A. Filer Information

Date	
Service Provider	
Contact Name	
Contact Number	
Contact Email	
Reporting Period	

B. Total Call Information

Total Live 911 Calls		
<i>Total 911 Calls Excluded *</i>		

* In Section E, provide information on each type of excluded call and the total number of such calls excluded for the reporting period.

C. Reporting by Technology

Positioning Method	Morphology	Total Calls	Yield (%)
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Add Rows as Necessary]			

D. Reporting by Morphology

Morphology	Positioning Method	Total Calls	Yield (%)
Dense Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

Nationwide Carrier Live 911 Call Reporting Form

Test City: Atlanta

	[Enter Technology Name]		
Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Suburban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Rural	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Combined	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

E. Exclusions

Type of Excluded Call	Total Calls Excluded
[Add Rows As Necessary]	

Nationwide Carrier Live 911 Call Reporting Form

Test City: Chicago

A. Filer Information

Date	
Service Provider	
Contact Name	
Contact Number	
Contact Email	
Reporting Period	

B. Total Call Information

Total Live 911 Calls		
<i>Total 911 Calls Excluded *</i>		

* In Section E, provide information on each type of excluded call and the total number of such calls excluded for the reporting period.

C. Reporting by Technology

Positioning Method	Morphology	Total Calls	Yield (%)
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Add Rows as Necessary]			

D. Reporting by Morphology

Morphology	Positioning Method	Total Calls	Yield (%)
Dense Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

Nationwide Carrier Live 911 Call Reporting Form

Test City: Chicago

	[Enter Technology Name]		
Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Suburban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Rural	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Combined	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

E. Exclusions

Type of Excluded Call	Total Calls Excluded
[Add Rows As Necessary]	

Nationwide Carrier Live 911 Call Reporting Form

Test City: Denver and Front Range

A. Filer Information

Date	
Service Provider	
Contact Name	
Contact Number	
Contact Email	
Reporting Period	

B. Total Call Information

Total Live 911 Calls		
<i>Total 911 Calls Excluded *</i>		

* In Section E, provide information on each type of excluded call and the total number of such calls excluded for the reporting period.

C. Reporting by Technology

Positioning Method	Morphology	Total Calls	Yield (%)
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Add Rows as Necessary]			

D. Reporting by Morphology

Morphology	Positioning Method	Total Calls	Yield (%)
Dense Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

Nationwide Carrier Live 911 Call Reporting Form

Test City: Denver and Front Range

	[Enter Technology Name]		
Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Suburban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Rural	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Combined	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

E. Exclusions

Type of Excluded Call	Total Calls Excluded
[Add Rows As Necessary]	

Nationwide Carrier Live 911 Call Reporting Form

Test City: Manhattan

A. Filer Information

Date	
Service Provider	
Contact Name	
Contact Number	
Contact Email	
Reporting Period	

B. Total Call Information

Total Live 911 Calls		
<i>Total 911 Calls Excluded *</i>		

* In Section E, provide information on each type of excluded call and the total number of such calls excluded for the reporting period.

C. Reporting by Technology

Positioning Method	Morphology	Total Calls	Yield (%)
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Add Rows as Necessary]			

D. Reporting by Morphology

Morphology	Positioning Method	Total Calls	Yield (%)
Dense Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

Nationwide Carrier Live 911 Call Reporting Form

Test City: Manhattan

	[Enter Technology Name]		
Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Suburban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Rural	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Combined	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

E. Exclusions

Type of Excluded Call	Total Calls Excluded
[Add Rows As Necessary]	

Nationwide Carrier Live 911 Call Reporting Form

Test City: Philadelphia

A. Filer Information

Date	
Service Provider	
Contact Name	
Contact Number	
Contact Email	
Reporting Period	

B. Total Call Information

Total Live 911 Calls		
<i>Total 911 Calls Excluded *</i>		

* In Section E, provide information on each type of excluded call and the total number of such calls excluded for the reporting period.

C. Reporting by Technology

Positioning Method	Morphology	Total Calls	Yield (%)
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Add Rows as Necessary]			

D. Reporting by Morphology

Morphology	Positioning Method	Total Calls	Yield (%)
Dense Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

Nationwide Carrier Live 911 Call Reporting Form

Test City: Philadelphia

	[Enter Technology Name]		
Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Suburban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Rural	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Combined	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

E. Exclusions

Type of Excluded Call	Total Calls Excluded
[Add Rows As Necessary]	

Nationwide Carrier Live 911 Call Reporting Form

Test City: San Francisco

A. Filer Information

Date	
Service Provider	
Contact Name	
Contact Number	
Contact Email	
Reporting Period	

B. Total Call Information

Total Live 911 Calls		
<i>Total 911 Calls Excluded *</i>		

* In Section E, provide information on each type of excluded call and the total number of such calls excluded for the reporting period.

C. Reporting by Technology

Positioning Method	Morphology	Total Calls	Yield (%)
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Add Rows as Necessary]			

D. Reporting by Morphology

Morphology	Positioning Method	Total Calls	Yield (%)
Dense Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

Nationwide Carrier Live 911 Call Reporting Form

Test City: San Francisco

	[Enter Technology Name]		
Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Suburban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Rural	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Combined	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

E. Exclusions

Type of Excluded Call	Total Calls Excluded
[Add Rows As Necessary]	

Non-Nationwide Carrier Live 911 Call Reporting Form

Reporting Region: [Name of County, State]

A. Filer Information

Date	
Service Provider	
Contact Name	
Contact Number	
Contact Email	
Reporting Period	

B. Total Call Information

Total Live 911 Calls		
<i>Total 911 Calls Excluded *</i>		

* In Section E, provide information on each type of excluded call and the total number of such calls excluded for the reporting period.

C. Reporting by Technology

Positioning Method	Morphology	Total Calls	Yield (%)
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Enter Technology Name]	Dense Urban		
	Urban		
	Suburban		
	Rural		
[Add Rows as Necessary]			

D. Reporting by Morphology

Morphology	Positioning Method	Total Calls	Yield (%)
Dense Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

Non-Nationwide Carrier Live 911 Call Reporting Form

Reporting Region: [Name of County, State]

	[Enter Technology Name]		
Urban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Suburban	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Rural	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
Combined	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		
	[Enter Technology Name]		

E. Exclusions

Type of Excluded Call	Total Calls Excluded
[Add Rows As Necessary]	