



**Mississippi Wireless Communication Commission
Interagency/Inter local Talk group Request Form
AUTHORIZATION TO USE TALK GROUP NOT OWNED BY THE
REQUESTING AGENCY**

Date: _____

Requesting Agency: _____

Authorizing Agency: _____

I. Request permission to ADD the following talk groups

Talk Group	To be installed in: (Mobile, portable, etc)	Model #	Serial #

(attach additional sheets if required)

II. Other Request / Requirements (Explain)

III. Reason for Request

(attach supporting documentation)

Name of individual completing application: _____
Address: _____
Telephone: _____
Email: _____

Request approved _____ Approved with conditions _____
Denied _____

Conditions:

Authorized Signature: _____
Name of Authorizing Individual _____
(Department Head or their designee) _____
Address: _____
Telephone: _____
Email: _____