

# Emergency Services Communication Bureau

## Addressing Officer Confirmation Form

The following individual is designated as the Addressing Officer. This individual is authorized to approve and provide addressing information to the Emergency Services Communication Bureau for Enhanced 9-1-1 purposes.

### ADDRESSING OFFICER INFORMATION

<b>First Name</b>	<b>MI</b>	<b>Last Name</b>	<b>Suffix</b>
<b>Address</b>		<b>Municipality of County Represented</b>	
<b>City</b>	<b>State</b>	<b>Zip</b>	
<b>Phone</b>		<b>Fax</b>	
<b>Email:</b>			

<b>Signature of Authorizing Official*</b>	<b>Title</b>
<b>Printed Name of Authorizing Official</b>	<b>Date</b>

Please sign and return this form to:

**Maria P. Jacques**  
**Emergency Services Communication Bureau**  
**18 State House Station**  
**Augusta, ME 04333-0018**  
**Fax: (207) 287-1039**