

Talkgroup Access Agreement

MEMORANDUM OF UNDERSTANDING BETWEEN NEWTON COUNTY, GEORGIA AND WALTON COUNTY, GEORGIA FOR ACCESS TO 700/800 MHZ TRUNKING TALKGROUPS

WHEREAS, **NEWTON COUNTY, GEORGIA** and **WALTON COUNTY, GEORGIA** are both interested in taking steps to better protect our citizens, visitors and businesses;

WHEREAS, **NEWTON COUNTY, GEORGIA** and **WALTON COUNTY, GEORGIA** respond and provide assistance to each other during emergencies and training exercises;

WHEREAS, **NEWTON COUNTY, GEORGIA** and **WALTON COUNTY, GEORGIA** own and operate P25 Trunked Radio Systems and this agreement governs the interconnectivity between the systems.

THEREFORE, Be it Resolved, that **NEWTON COUNTY, GEORGIA** and **WALTON COUNTY, GEORGIA** agree to the following procedures for the use of the counties' Trunked Radio Systems:

1. **WALTON COUNTY, GEORGIA** will exchange with **NEWTON COUNTY, GEORGIA** talkgroups for interoperability uses.
2. Each agency will provide serial numbers of all radios that require these talkgroups to the other agency initially and when requested.
3. Each agency will provide the required number of System Radio ID's based on the number of serial numbers provided as necessary.
4. Each agency will pay for all of its own costs associated with programming the authorized talkgroups into their respective equipment.
5. Each agency will provide the necessary technical information for programming radios. This information will not be shared with any other person or agency without prior written permission by both agencies.
6. This agreement may be cancelled with 90-days written notice by either agency.
7. Access to these channels is for Public Safety purposes only and unauthorized use should be prohibited.
8. Each agency will designate a point of contact, listed as a position within the agency, that can be relied upon to address questions, changes, and issues pertaining to this agreement.

Point of Contact for **NEWTON COUNTY, GEORGIA**:

| | | |
|--------------------------------------|-------|-------|
| _____ | _____ | _____ |
| Position/Title | Email | Phone |
| _____ | | |
| Name as of signing of this agreement | | |

Point of Contact for **WALTON COUNTY, GEORGIA**:

| | | |
|--------------------------------------|-------|-------|
| _____ | _____ | _____ |
| Position/Title | Email | Phone |
| _____ | | |
| Name as of signing of this agreement | | |

CHAIRMAN, NEWTON COUNTY, GEORGIA
Date: _____

CHAIRMAN, WALTON COUNTY, GEORGIA
Date: _____

COUNTY CLERK, NEWTON COUNTY, GEORGIA

COUNTY CLERK, WALTON COUNTY, GEORGIA