

ANI/ALI Inquiry Form
US West / SCC Communications

PSAP Name:

Transaction ID:

Date/Time of Call: am / pm

Call Taker:

Class of Service:

Comments:

No Record Found (NRF)

Incorrect Information Displayed

Misroute

Displayed/Incorrect Information

PSAP:
ANI Telephone:
Name:
Address:
Community:
Location:
ESN:

Correct Information

PSAP:
ANI Telephone:
Name:
Address:
Community:
Location:
ESN:

MSAG-Valid/Verified

MSAG Change Request Form is Attached because Address is not Currently MSAG-Valid

E9-1-1 County Coordinator Comments:

Date Forwarded to SCC:
 MM/DD/YY

USW/SCC Use Only

Resolution:

Date:

Analyst:

Comments: