

**Verizon Wireless Workflow Manager**

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**FAX COVER PAGE**

To	Denise
To Fax Number	2196960506
From Analyst	Jason Kobran
From Phone Number	8004515242
From Fax Number	8003456720
Case ID	190238246

**Comments :**

Please complete the attached Emergency Information Request form and fax it to 8003456720.

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**Please note, VzW fax numbers have changed to:**

**Subpoenas : 888-667-0028**  
**Court Orders : 888-667-0026**  
**Surveillance : 800-267-9129**  
**Exigent : 800-345-6720**

Please note that the time reflected on any call detail report or bill copy is reflective of the switch that processed the call, which may not be the same as the clock time at the cell site where the call was initiated.

The information contained in this message and any attachment may be proprietary, confidential and privileged or subject to the work product doctrine and thus protected from disclosure. If the reader of this message is not the intended recipient, or an employee or agent responsible for delivering this message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify me immediately by replying to this message and deleting it and all copies and backups thereof. Thank you.



**EMERGENCY SITUATION DISCLOSURE**

Phone: (800) 451-5242 Option "9"

Fax: (800) 345-6720

Upon receipt of this completed form, Verizon Wireless may divulge records or other information to governmental entities in certain emergencies, pursuant to 18 U.S.C. §2702(b) (8) or §2702(c) (4) or an equivalent state law. Please complete this form and immediately fax it back to Verizon Wireless at 800-345-6720.

Case #:

Analyst Name:

Date of Request:

RE: Mobile Number, IP Address or Subscriber

Does this request potentially involve the danger of death or serious physical injury to a person, necessitating the immediate release of information relating to that emergency?

YES  NO

Type of Records Being Requested:

- Subscriber Information
- Location Information
- Incoming and outgoing calls to and from target phone. Includes time/date.
- SMS Detail - Phone numbers that text messages were sent and received from. Includes time/date.
- Hotline Service (will require secondary form)

Time Frame for Which Information is Requested:

*\*\*\*The lat and long measurements for location information are derived solely from the Round Trip Delay measurement. They are best estimates and are not related to any GPS measurement. Measurements with a high confidence factor may be more accurate than measurements with a low confidence factor, but all measurements are best estimates available rather than precise location.*

Additional Comments and/or Information/Service Change Requests:

**Requesting Investigative or Law Enforcement Officer:**

Name:  Rank/Title:

Law Enforcement Agency:  Phone:

Dispatcher / Badge Number (if applicable):  Fax:

Address:

Email Address:

I certify that the foregoing is true and correct and understand that Verizon Wireless may rely upon this form to make an emergency disclosure to my law enforcement agency or governmental entity pursuant to 18 U.S.C. § 2702(b)(8) or § 2702(c)(4).

Requesting office/agent signature:  Date:

To: Verizon Wireless Fax: 908-306-7501

This is an emergency request for information on the following wireless number:

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This agency received a 9-1-1 emergency call for assistance from the above wireless telephone number.

Date of Call	Time of Call 00:00- 24:00	Duration Min: Sec:	Nature of Call

Based on that telephone call, we believe that one or more people face immediate danger of death or serious injury. We request that you promptly provide to the extent available the following information necessary to initiate the appropriate response. (Please use above fax & telephone numbers.)

- Subscriber name, billing address, home & business phone numbers for the above number
- Cell site or location information for the 9-1-1 call from the above number

### Requesting Agency Information

Title	Employee	Signature	Date

Requesting Agency Case Number:                      Requesting Agency Dispatch Log #