TETRA QUESTIONNAIRE

1. Generic information

*To be filled by the requestor.*

**Department/Group/Section** :………………………………. **Snow request number :**…………………………..

**Contact Name** : ………………………………..

|  |  |  |
| --- | --- | --- |
| **Generic information questions** | **Response** | **Comment** |
| Describe briefly the purpose of the TETRA need and how terminals will be used. |  |  |
| Where is (are) the TETRA terminal(s) going to be used? |  |  |
| Is there a control room (or equivalent) that will supervise the activity of workers equipped with TETRA terminals | YES □ NO □  If **YES**, please specify:  Control room name: ………………………………  Control room location: …………………………..  Control room operating hours:  ……………………………………………………………….  Control room phone number: ………………..  If **NO**, please specify:  Supervisor name: …………………………………..  Supervisor phone number(s): …………………………. | Note: The supervisor may be contacted by the Fire brigade in case of Emergency |
| Is TETRA radio coverage available where terminal(s) will be used? | YES □ NO □  If known locations are not covered, please specify:  ………………………………………………………………  ……………………………………………………………… | Note: in the GIS portal, there is already some level of information |
| Is TETRA radio coverage critical for the activity to be carried out? | YES □ NO □  If yes, please explain:  ………………………………………………………………  ……………………………………………………………… | e.g.: The activity can’t be performed in case of loss or lack of TETRA radio coverage. |
| Is TETRA indoor localization coverage available where terminal(s) will be used? | Not applicable □ YES □ NO □  If known locations are not covered, please specify:  ………………………………………………………………  ……………………………………………………………… | Note: in the GIS portal, there is already some level of information |
| Is TETRA indoor localization coverage critical for the activity to be carried out? | YES □ NO □  If yes, please explain:  ………………………………………………………………  ……………………………………………………………… | e.g.: The activity can’t be performed in case of loss or lack of TETRA indoor localization coverage. |
| Is (Are) the TETRA terminal(s) going to be shared among different persons or assigned individually? | YES □ NO □ |  |
| Is (Are) the TETRA terminal(s) going to be used as a safety device to compensate the two persons rule? | YES □ NO □ | Note that GL, Contract manager, DSO or LEXGLIMOS approval is necessary in such circumstances. |
| Will the TETRA terminals be used in locations that may have an explosive atmosphere? | YES □ NO □ |  |
| Will the TETRA terminals be used in locations with high magnetic field? | YES □ NO □ |  |
| Any other comments related to the use of TETRA terminals |  |  |

1. Technical details

*To be filled by IT-CS and the requestor.*

|  |  |  |
| --- | --- | --- |
| **HARDWARE** | **NON ATEX** | **ATEX** |
| Handsets quantity |  |  |
| Additional Battery | YES □ NO □ Quantity: | YES □ NO □ Quantity: |
| Battery loader 1+1 | Quantity: | Quantity: |
| Battery loader 6+6 | Quantity: | Quantity: |
| Vehicle battery loader | Quantity: | Quantity: |
| Other |  |  |
|  |  |  |
| **SERVICES** | **NON ATEX** | **ATEX** |
| Default (cannot be changed) | Man Down activated : YES  Key # : lock keypad  Key \* : re-size screen dispay | |
| Number of talkgroups (to talk between within the fleet) |  |  |
| Name of these talkgroups (less than 10 characters) |  |  |
| Name of the Quick group (the one automatically selected when the radio is switched ON) |  |  |
| Need to talk to other services/talkgroups (define which ones) |  |  |
| Name of the TETRA devices (less than 10 characters) |  |  |
| Shortcut to call a Control Room’s TETRA Dispatcher/desk radio | YES □ NO □ Detail: | YES □ NO □ Detail: |
| Status messages (if enable to talk to a Dispatcher) |  |  |