



LEADS TERMINAL AGENCY AGREEMENT

I accept responsibility to comply with rules 4501:2-10-01 to 4501:2-10-12 and 4501:2-10-14 of the Ohio Administrative Code (O.A.C.) governing LEADS. Failure to abide by these rules may result in the termination of LEADS services and / or prosecution when appropriate, as set forth in O.A.C. 4501:2-10-11. By endorsing the agreement the administrator agrees to cooperate to:

- (1) Investigate alleged violations of LEADS / NCIC / NLETS rules.
- (2) Take appropriate administrative or criminal action when applicable and notify the LEADS CSO in writing as soon as possible.
- (3) Maintain appropriate service level agreements on any agency owned equipment used as the primary LEADS terminal and to resolve service fees when needed.
- (4) Complete the new administrator indoctrination training.
- (5) Utilize only standard, LEADS accepted, network communication protocols for systems connected to LEADS. No special code or programming shall be installed on the LEADS network to communicate with an individual agency. The agency equipment shall utilize one of the standard protocols offered by LEADS. If at any time the local equipment is suspected of causing problems on the LEADS network, the local agency shall disconnect their equipment from the LEADS communications lines. The equipment shall remain disconnected until it is determined the problem does not reside in the local agency equipment or the agency equipment has been repaired at the agency expense.
- (6) Allow no special programming code which would enable communication to an individual agency to be installed on systems connected to LEADS without prior approval of the chair of the LEADS steering committee.
- (7) Remove any local equipment connected to LEADS that is suspected of causing system or network problems.



LEADS TERMINAL AGENCY AGREEMENT

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|----------------------|---------------------|
| TERMINAL AGENCY NAME | TERMINAL AGENCY ORI |
|----------------------|---------------------|

| | |
|----------------------|-------------------|
| PHONE 1 | PHONE 2 |
| AGENCY EMAIL ADDRESS | AGENCY FAX NUMBER |

PHYSICAL ADDRESS

| | | |
|--------|-------|-----|
| STREET | | |
| CITY | STATE | ZIP |

MAILING ADDRESS

| | | |
|--------|-------|-----|
| STREET | | |
| CITY | STATE | ZIP |

Is this agency a 24 hour operation? YES NO

If no, what are the hours of operation? _____

| | | |
|--|-------|--|
| AGENCY ADMINISTRATOR'S NAME - PRINTED | TITLE | |
| AGENCY ADMINISTRATOR'S SIGNATURE X | DATE | |

If you do not have authority to commit this agency to a financial agreement, this document shall also be signed by the person(s) having such authority:

| | | |
|--|-------|--|
| NAME-PRINTED | TITLE | |
| AGENCY FISCAL COMMITMENT'S SIGNATURE X | DATE | |

Information Below To Be Completed By LEADS**LEADS STEERING COMMITTEE CHAIRPERSON**

| | | |
|---|---|--|
| STEERING COMMITTEE CHAIR - PRINTED Captain Rob Jackson | TITLE LEADS Steering Committee Chair | |
| STEERING COMMITTEE CHAIR SIGNATURE X | DATE | |

Please return this form by fax to: (614) 995-1230
or by mail to: LEADS Administrative Office, P.O. Box 182075, Columbus, OH 43218-2075