



Intercept Site Information Form

Your Name: _____

Your Email: _____

Name of Site: _____

Location: _____

Description of Site: _____

(example: park, paved lot, field, etc.)

GPS Coordinates: North: _____ West: _____

EMS Agency: _____

Radio Frequency: _____

PL Tone: _____

Phone: _____

Fire Department: _____

Radio Frequency: _____

PL Tone: _____

Phone: _____

Law Enforcement Agency: _____

Radio Frequency: _____

PL Tone: _____

Phone: _____

Site Activation Instructions: _____

(What agencies need to be contacted when the site is being used for a medical emergency? How should these agencies be contacted?)

Please mail the completed form to:

OSF Aviation
1400 S. Johanson Rd.
Peoria, IL 61607