|  |
| --- |
| **Call Recording Form** |
| **Agency Name** |  |
| **Department** |  |
| **Address** |  |
| **Contact Name** |  |
| **Contact Phone** |  |
| **Contact Email** |  |
|  |
| **Call Recording** | **Basic****System****Requirements** | # of Agents: |  |
| # of Supervisors: |  |
| # Calls/Per Day |  |
| Avg. Call Length/Sec |  |
| **Recording****Types** | **Voice** | **Voice** | Yes[ ]  No[ ]  |
| On-Demand | Yes[ ]  No[ ]  |
| (On Demand can be based on Call Type or filters can be defined to randomly record a specific number of calls within a defined timeframe)***Example: 20% of all calls between 8am to 5pm M-F*** | *Filter by Call Type* |
| Yes[ ]  No[ ]  |
| *Random* |
| Yes[ ]  No[ ]  |
| *Percentage* |
| 0 % |
| Continuous (100%) | Yes[ ]  No[ ]  |
| **Data** | **Data** | Yes[ ]  No[ ]  |
| On-Demand | Yes[ ]  No[ ]  |
| (On Demand can be based on Call Type or filters can be defined to randomly record a specific number of calls within a defined timeframe)***Example: 20% of all calls between 8am to 5pm M-F*** | *Filter by Call Type* |
| Yes[ ]  No[ ]  |
| *Random* |
| Yes[ ]  No[ ]  |
| *Percentage* |
| 0 % |
| Continuous (100%) | Yes[ ]  No[ ]  |
|  |
|  | **Storage** | Online (Real-time) Days of Storage***Example: 30 to 90 Days*** |  |
| Archive Days of Storage***Example: 90+Days*** |  |

Please complete the form and email to ITS.Incidents@its.nc.gov