

General Guidance:

1. All forms must be submitted by personnel authorized to make fiduciary transactions on behalf of the subscribing agency.
2. All forms must be submitted via one of the following choices listed by preference:
 - a. Emailed to DAS-MARCS.Admin@das.ohio.gov.
 - b. Faxed to 614-995-0067, Attn: MARCS/IP Services.
 - c. Mailed to: Ohio MARCS Program Office, 4200 Surface Rd, Columbus OH 43228.
3. If a form is emailed, it must come from the official email account of the subscribing agency or from the official email address of an authorized agent or representative of the agency.
4. Forms submitted by a third party on behalf of the subscribing agency will not be accepted and will be returned.
5. If a form is emailed as an attachment, the body of the email message must include the name, title, phone number, and position or affiliation that the submitter has with the subscribing agency.
6. All forms will open quicker if you download them first to your machine and then work from the local copy.
7. Specific questions can be answered by calling 614-995-0840, or by sending an email to DAS-MARCS.Admin@das.ohio.gov.

New Subscribers:

1. You are considered a **New Subscriber** if any one of the following applies:
 - a. Your agency has never had communication devices programmed for the MARCS system.
 - b. Your agency has had communication devices programmed for MARCS, but your agency did not pay for the service.
 - c. Your agency has had communication devices programmed for MARCS, but every one of those devices was considered to be used on an emergency only basis, and therefore you were not billed regularly for services.
2. New subscribers should follow the four steps in the order they are listed on the [MARCS website, Subscriber Process tab](#). In order, they are:
 - a. Step 1: Review the **MARCS/IP Services.pdf** – This one page document briefly describes the current services that MARCS/IP provides as well as the rates for services. Those rates are applicable to all MARCS/IP subscribers.
 - b. Step 2: Review the **MARCS/IP Services Terms and Conditions.pdf** – this document outlines the terms and conditions for MARCS/IP services that subscribers agree to before initiating service. In addition to defining the terms of the agreement, it identifies the parties involved, lays out the responsibilities of both the provider and the subscriber, stipulates inventory guidelines, and explains the invoicing and payments of services.

- c. **Step 3:** Submit the **MARCSIP Agreement.pdf** – this PDF fill-in form is the signature page that binds the agreement between MARCS and the subscriber. Signing and submitting this document certifies that the subscribing agency agrees to the posted Terms and Conditions as described in Step 2.
- i. The form has been created in such a way that information entered into the form can be saved on the user’s computer.
 - ii. The following fields on the MARCSIP Service Subscription Agreement Signature Page are required fields: Subscribing Agency Name, Address, City, State, Zip, County, Contact Name and Phone under the Subscriber section.
 - iii. Fields that ask for phone or fax numbers require that the full ten-digit number be entered without any dashes, for example, (614)-995-0840 would be entered as 6149950840.
 - iv. Some of the fields have tool tips to guide the submitter in providing information for the fields. Hovering over the field with the computer mouse causes those tool tips to pop up.
 - v. The Remitting Agency Name and profile information under the Billing Information section is who the invoices for service will be made out to.
 - vi. Selecting the check box next to “Click here if same” will auto-populate the fields in the Billing Information section with the same information provided in the Subscriber section all at once. Each of those fields can then be over-ridden individually after it has been auto-populated if need be.
 - vii. If no information is entered under the Billing Information section, the Subscriber will be billed for services.
 - viii. The form can be submitted in one of two ways:
 1. Electronically – an electronic or digital signature can be applied to the form and the form can then be submitted by clicking the Submit by Email button. Signing the form electronically locks all the fields so that the form cannot be altered.
 2. By hand – If preferred, the form can be printed out, signed by hand and then either mailed in via USPS or scanned in and emailed to DAS-MARCS.Admin@das.ohio.gov.
 - ix. Once the form has been received by the MARCS Program Office, it will be reviewed, and if approved it will be signed by the MARCS Program Director and returned to the Subscribing Agency.
- d. **Step 4:** Submit the **MARCSIP Device Information Excel Form.xlsx** – this is an Excel form that has two parts to it: 1) the first sheet of the file gathers profile information about the subscriber as well as other technical contact information and programmer preferences, and 2) the second sheet is where information pertaining to the actual devices to be activated is listed.

- i. Once completed, this Excel file should be attached to a message and emailed to DAS-MARCS.Admin@das.ohio.gov. The email has to come from someone within the agency that is authorized to make purchases for that agency.
- ii. Many of the fields on the form have drop down lists from which to choose values to enter. When that happens, only the values in the drop down lists can be entered.
- iii. Subscriber Information - While it may seem redundant to enter subscriber profile information again on this form, remember that this form is submitted separately from the service agreement signature page. The agreement signature page can be submitted anytime the subscriber has agreed to become a MARCSIP subscriber. It may be awhile after that before the devices are actually obtained and ready to be activated for service. (This form is also used when existing subscribers desire to add more devices to their fleet.)
- iv. Subscriber Technical Information – this section is looking for the name and contact info for the person within your organization who can answer technical questions about your devices. If that is no one, then just leave that section unanswered.
 1. The last field – Technical Alerts Distribution List – is looking for the email addresses of all those in your organization who need to know when MARCSIP is experiencing technical difficulties that affect the performance of your communication devices. Separate those email addresses with semi-colons.
- v. Programmer Information – this section is asking for the identification of who you have scheduled to do your programming. If you do not have anyone scheduled and you wish to have MARCS Programming Staff program your devices, you have the option to choose that. This information allows us to route your job to the appropriate recipient in a timely manner.
- vi. User Fee Payment Information – this section asks for information relative to how the device fee(s) will be paid, i.e., grant funded, etc. It also allows for a choice of being billed on an annual basis or on a quarterly basis.
- vii. Comments – space is provided here for anything else the subscriber feels is pertinent to the devices being submitted for activation.
- viii. Device Form – the second page of this form is where detail information about each device is entered. Again, some of these fields require selections made from drop down lists and some are free-form fields. Tool tips pop up guiding the submitter as to what to enter into each field.
 1. There are enough lines on this form for (100) devices to be added for activation. If more than (100) devices add being added, a second form would need to be submitted for the remaining devices.

Existing Subscribers:

1. You are considered to be an **existing subscriber** if any one of the following applies:
 - a. You currently have devices programmed for MARCSIP *and* your agency is paying the subscriber fee.
 - b. Your agency does not have radios programmed for MARCSIP, but you are paying the subscriber fee for another agency.
 - c. Your agency is paying the subscriber fee for the MARCS 3.5 system.
2. Existing subscribers have a variety of forms to choose from under the Existing Subscribers section of the website depending on what the subscriber needs to do.
 - a. **MARCSIP Device Information Excel Form.xlsx** – This form is used to activate new devices onto MARCSIP when adding more devices to your existing account. (The same form is used whether the subscriber is new or existing.) For more detailed information about the form itself, please read all of Step 4 above under the New Subscribers section.
 - b. **Equipment Transfer Receipt** – Upon occasion, activated devices are transferred from one agency to another. When that happens, it is necessary to determine which agency will be paying the subscriber fee. When the agency receiving the devices is now responsible for the fee, the Equipment Transfer Receipt must be submitted.
 - i. The Subscriber section at the top of the form is where profile and contact information for the receiving agency is entered.
 - ii. Profile information identifying the agency transferring the devices is entered by over-writing the bolded section in the sentence found in the middle of the form, right above the Serial # table.
 - iii. Information identifying each device is entered into the table in the middle of the form. Space is provided for up to (6) devices. If more devices are being transferred, more rows can be added to the table by right-clicking in the space to the left of any row and choosing Insert / Insert Row Above, or Insert / Insert row below. (The number of rows selected before right-clicking, is the number of rows that will be inserted either above or below.)
 - iv. The Signature section at the bottom of the form is to be completed by the receiving agency.
 - v. If multiple devices are being transferred to multiple agencies, a separate Transfer Receipt must be submitted for each receiving agency.
 - vi. If the receiving agency is not a current MARCSIP subscriber, that agency must complete steps 1 through 3 under the New Subscribers section above before this form can be submitted.
 - c. **MARCSIP Device Update Excel form.xlsx** – This form is used by existing subscribers to either replace an activated device by swapping out serial numbers, deactivate a device completely, or update a device from the 3.5 system to the 7.x (IP, P25) system.

- i. The form is to be completed and submitted by the agency responsible for the subscriber fee for the devices listed. Enter the Subscriber/Agency Name and the County for the submitting agency.
 - ii. If one device is replacing another, meaning the device ID is to remain activated, but be assigned to another device, then:
 1. Select “Replace” in the column named REQUEST.
 2. Enter either the Device ID in the column named MARCS DEVICE ID. If both systems are currently activated for the device, enter both IDs separated by a comma and a space.
 3. Enter the serial number of the device being replaced in the column named SERIAL #.
 4. Enter the new serial number of the replacement device in the column named NEW SERIAL #.
 5. Enter values in the other fields if any value is changing as a result of the replacement.
 - iii. If the service of a device needs to be permanently deactivated, then:
 1. Select “Deactivate” in the column named REQUEST.
 2. Enter the Device ID in the column named MARCS DEVICE ID for the service that is to be deactivated.
 - a. If both services (3.5 & 7.x) are to be deactivated on the device, then enter both Device IDs separated by a comma and a space and then select “Both” under the column named SERVICE.
 3. Enter the serial number of the device with the device ID(s) to be deactivated in the column named SERIAL #.
 4. Select which service is to be deactivated for the device under the column named SERVICE.
 - iv. If a device currently activated for 3.5 service needs to be updated for the 7.x (P25, IP) service, then:
 1. Select “P-25 Update” under the column named REQUEST.
 2. Enter the 3.5 ID under the column named MARCS DEVICE ID.
 3. Enter the serial number of the device under the column named SERIAL #.
 4. Select either “P-25 (7.x) Only” or “Both” under the column named SERVICE.
- d. **MARCSIP Subscriber Information Update.pdf** – it is the responsibility of the existing subscriber to keep the MARCS Program Office updated as to agency contact or profile changes. This form allows those changes to be communicated to the program office.

- i. The form has been created in such a way that information entered into the form can be saved on the user's computer.
- ii. The form is divided into two sections: the left side should have the information that the MARCS Program Office has on file, and the right side is where changes to that information should be entered.
- iii. Entering the MARCS Customer ID in the first field would be very helpful for the program office to correctly identify the account, but it is not required. The MARCS Customer ID is found on the subscriber's invoice.
- iv. The following fields on the left hand side are required for the MARCS Program Office to correctly identify the submitter: Subscribing Agency Name, Address, City, State, Zip and County..
- v. The form can be submitted in one of two ways:
 1. Electronically – an electronic or digital signature can be applied to the form and the form can then be submitted by clicking the Submit by Email button. Signing the form electronically locks all the fields so that the form cannot be altered.
 2. By hand – If preferred, the form can be printed out, signed by hand and then either mailed in via USPS or scanned in and emailed to DAS-MARCS.Admin@das.ohio.gov.
- e. All forms are to be submitted according to the directions listed under General Guidance at the beginning of this document.

Miscellaneous Forms:

1. **Share Talk Group MOU Template** – This form is a template only. The purpose of the form is for existing MARCS subscribers to share their dedicated talkgroups with other agencies for the purpose of mutual aid.
 - a. This Word document should be copied onto the letterhead of the owning agency.
 - b. It should be signed by the owning agency director or Chief Operations Officer.
 - c. While it is not required to use this Authorization template, at a minimum all of the information in this template has to be included on an agency's own authorization letter.