

COMPUTER ACCESS REQUEST

Please type, illegible forms will be returned.

USER INFORMATION:

☐ New User Position # **SDT**- _____ Start Date _____ Ticket #: _____
Full Legal Name: _____ EIN _____ SSN (last four): _____
Office Address: _____ City: _____ State: _____ Zip: _____
Division: _____ ORG: _____ Mail Drop: _____ Phone (_____) _____
Employee Type: 3rd Party Ring # _____ *Assignment Duration _____
Company Name (required for Third Party & Contractors): _____

USER ID CHANGES:

Current RACF ID: _____

☐ Transfer Effective Date: _____

☐ Termination Date (Required): _____

Deleted Employees Only:

All data (e.g., email, and U Drive) for deleted employee is archived by default.
Would you like to access to the deleted employee's data archive?

☐ Yes* ☐ No

*A link to the deleted employee's data archive will be sent to the current supervisor.

SELECT REQUESTED ACCESS*: (select add, change, or delete from drop down menus)

Advantage <input type="text" value="NONE"/>	FAST <input type="text" value="NONE"/>
AIDW - Safety Data Mart <input type="text" value="NONE"/>	FAST-AC FORMS <input type="text" value="NONE"/>
Extended NCIC Codes: _____	Role Options: <input type="text" value="Select Role"/>
Officer NCIC Codes: _____	HCRS <input type="text" value="NONE"/>
Role Options <input type="text" value="Select Role"/>	Intelex <input type="text" value="NONE"/>
ALISS <input type="text" value="NONE"/>	Role Options: <input type="text" value="Select Role"/>
Role Options: <input type="text" value="Select Role"/>	Internet <input type="text" value="NONE"/>
CMTTP <input type="text" value="NONE"/>	PeCos <input type="text" value="NONE"/>
Role Options <input type="text" value="Select Role"/>	(PeCos User Role & Permission form required)
Control D/ARD <input type="text" value="NONE"/>	Planview <input type="text" value="NONE"/>
Same as RACF ID: _____	Remote Access <input type="text" value="NONE"/>
<input type="checkbox"/> Supervisor (Required) <input type="checkbox"/> Employee	TARGATS <input type="text" value="NONE"/>
eCMS <input type="text" value="NONE"/>	Role: _____
Role Options: <input type="text" value="Select Role"/>	Title & Reg and Driver's License <input type="text" value="NONE"/>
Email <input type="text" value="NONE"/>	MVD Role: _____
	(Required)

*List specific access needed where applicable:

Manager Name: _____ Phone: _____ Date: _____
Manager Signature: _____ RACF ID: _____

Complete the following steps:

1. Contact the ADOT Service Desk to obtain a ticket number (phone: 602-712-7249 or email: SDesk@azdot.gov)
2. Submit completed form to Data Security (fax: 602-712-3368 or email: IDataSecurity@azdot.gov)