

<b>STATE OF NORTH CAROLINA</b> NORTH CAROLINA ADMINISTRATIVE OFFICE OF THE COURTS	<b>ACCESS REQUEST AND SECURITY APPROVAL</b> <b>(THIRD-PARTY VENDOR ONLY)</b>
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**See Side Two for instructions on completing this form.** Fax Side One of completed form to (919) 890-1916 or scan Side One of completed form and email to the Access Administration team at Security@nccourts.org.

VENDOR USER INFORMATION			
User's Name (first, middle, last are required)	<input type="checkbox"/> Name Change	Mother's Maiden Name	Social Security No. (last four digits)
Title/Position		Telephone Number	Telephone Extension
Requested Action For User (select only one)		Separation Date	NCAOC User ID (NCAOC-assigned)
<input type="checkbox"/> Add New User <input type="checkbox"/> Change For Existing User <input type="checkbox"/> Delete/Terminate Access			

AGENCY INFORMATION	
Agency Name	Agency County

ACCESS REQUEST – Specify (A) for Add or (D) for Delete
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User is designated as a Password Administrator to reset other users' passwords for NCAOC systems accessed by this agency's users.

**NCAOC Systems Inquiry**   
  Civil Inquiry (VCAP)   
  Criminal Inquiry (ACIS)

Data Extract File (specifically identify file(s) below, in the SPECIAL INSTRUCTIONS/OTHER INFORMATION section of this form)

USER AGREEMENT
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The User agrees to abide by all applicable federal, state, and local laws regarding appropriate access to public records of the courts and agrees to abide by all information security policies and interagency agreements of the North Carolina Administrative Office of the Courts (NCAOC) and the North Carolina Department of Information Technology (DIT). These policies include, but are not limited to, the following:

1. The User ID assigned to the User will be used only by the User; shared User IDs are not allowed. The User's password will not be revealed to other individuals at any time for any reason.
2. The User must remain with any device currently accessing an NCAOC information system. Sessions connected to NCAOC information systems must be disconnected immediately if the User is not in direct, immediate control of the accessing device.

The User shall not share with unauthorized personnel information that is exempt from the Public Records Act (G.S. Chapter 132), including, but not limited to, juvenile offender information or information regarding unreturned criminal processes. Officials, employees, contractors, and agents of a government agency or subdivision of such agency are granted access to NCAOC information systems only for the performance of their official duties. Use of the access granted to NCAOC information systems for any purpose outside the scope of those duties may result in disciplinary action (including termination) and civil and/or criminal liability. The User further agrees that any violation of the security policies of NCAOC and/or DIT or of any federal, state, or local law regarding access to or security of NCAOC information systems may result in the immediate and irrevocable termination of the User's access to NCAOC information systems at the sole discretion of the NCAOC's chief information officer or his/her designee.

User's Signature (By signing, User indicates acceptance of User Agreement.)	Date
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SPECIAL INSTRUCTIONS/OTHER INFORMATION
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REQUESTING AUTHORITIES
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The undersigned governmental agency requesting authority ("Requesting Authority") hereby acknowledges and agrees that this request is made pursuant to a valid and current licensing agreement between the NCAOC and the government agency, for access to NCAOC information systems. The Requesting Authority asserts that he/she possesses the authority under that agreement to request access to NCAOC information systems for employees of the agency and also possesses the authority to request access for the Vendor identified below.

Requesting Authority's Name (type or print)	Requesting Authority's Signature	
Requesting Authority's Title	Requesting Authority's Telephone No.	Date

The undersigned requestor ("Requestor"), on behalf of his/her nongovernmental entity ("Vendor"), hereby acknowledges and agrees that this request is made pursuant to an agreement between the Vendor and the government agency, to fulfill a governmental function for that government agency. The Requestor asserts that he/she possesses the authority under that agreement to request access to NCAOC information systems for employees of the Vendor for the sole purpose of fulfilling that governmental function. The Requestor further asserts that he/she is authorized by the Vendor to bind the Vendor.

Vendor's Name (type or print)	Requestor's Name (type or print)	Requestor's Signature
Requestor's Title	Requestor's Telephone No.	Date

(Over)

## INSTRUCTIONS FOR COMPLETING ACCESS REQUEST AND SECURITY APPROVAL FORM (AOC-A-155)

This security form is to be used for all non-Judicial Branch users from government agencies, with the exception of law enforcement and probation offices, to request third-party vendor (Vendor) access to NCAOC information systems. (*Users from law enforcement and probation should use Access Request Form AOC-A-152.*) The Requesting Authority must complete the reverse side of this form to identify a Vendor User and request access to NCAOC information systems for that User. All required sections must be filled out correctly and completely. The Requesting Authority and the Vendor's Requestor shall provide authorized signatures. If the form is incomplete, illegible, unsigned, improperly signed, or not dated, it will be returned to the sender without further action by the NCAOC. Questions regarding proper use of this form should be directed to NCAOC Access Administration at (919) 890-2221.

### USER INFORMATION (Fields with \* must be entered)

- \*User's Name: Provide the User's complete first, middle, and last names (*e.g., John Lee Doe*).
- \*Mother's Maiden Name for the User is required for identification purposes.
- \*Social Security Number (*last four digits*): Provide the last four digits of the User's Social Security number.
- Title/Position: Provide the name of the User's job title/position.
- Telephone Number: Provide the User's telephone number.
- Telephone Extension: Provide the User's telephone number extension.
- \*A Requested Action must be selected for the User.
  - Add New User
  - Change For Existing User
  - Delete/Terminate Access (**NOTE:** *If deleting a separated User, access to each system does not need to be marked with a "D."*)
- Separation Date is required for a deleted User.
- NCAOC User ID: The User's NCAOC User ID is required if changing or deleting a User's access.

### AGENCY INFORMATION (Fields with \* must be entered)

- \*Agency Name: Provide the full name of the User's agency.
- \*Agency County: Provide the full name of the county, unless the agency is a state or federal agency.

### ACCESS REQUEST

Enter (A) to add or (D) to delete the User's access and roles for the following:

- Password Administrator: The User is designated to be given the capability to reset passwords for other users within this User's agency for the purpose of accessing NCAOC systems. (**NOTE:** *Password Administrators may be designated only by agencies with more than 10 users.*)
- Civil Inquiry (VCAP): The User may view records in NCAOC's Civil Case Processing System.
- Criminal Inquiry (ACIS): The User may view records in NCAOC's Automated/Criminal Infractions System.
- Data Extract File(s): The User may utilize the NCAOC's data extract file in accordance with the licensing agreement.

### USER AGREEMENT

The User for whom access is being requested must read, understand, and indicate agreement with the statements in this section of the form by signing at the bottom of the section and entering the date.

### REQUESTING AUTHORITY

The Requesting Authority must complete this entire section. The Requesting Authority is generally the head of the agency or a designee named in the licensing agreement. The individual serving as the Requesting (*approving*) Authority must print his or her name, add his or her title, telephone number, and the date (*of request*), and sign in the Requesting Authority's Signature box to authorize access for the User.

### VENDOR REQUESTOR AUTHORITY

The Requestor, a person authorized to bind the Vendor, shall print the Vendor's name, the Requestor's name, and his or her title and telephone number at the bottom of this section. The Requestor shall enter the date and sign in the Requestor's signature box to indicate agreement with the Requestor statement at the bottom of Side One and to authorize access for the Vendor's user.