

**Commonwealth of Virginia
CARS FINDS Security Authorization Request**

Name: _____, CARS Security Officer
Agency: _____
Phone Number: _____ Extension: _____
E-mail Address: _____ Date Submitted: _____

Function: _____

User Information

TSO Logon ID: _____
First Name: _____ Last Name: _____
Agency: _____

Access

Update Online Reports: _____ *
Access 1099 Reporting: _____

** DOA suggests limiting full access for "All User Stored Reports" to two staff members at your agency.*

Access Agencies

Signatures

FINDS access is granted at the request of the agency Security Officer. Access is provided for the sole purpose of performing business related downloads in accordance with the employee's job responsibilities. Misuse of this access is a Group II offense under Standards of Conduct and Performance falling under the category of "unauthorized use or misuse of State property or records." All downloaded data is confidential and by signing below the employee agrees to maintain such data as confidential before and after employment and to store such data in accordance with VITA/NG sensitive data standards.

Employee Name: _____ Date: _____

Signature: _____

Agency CARS Security Officer: _____ Date: _____

Signature: _____

If the agency is not able to include a digital signature on the form, signatures should be obtained on the form filed for audit review.

Department of Accounts Use Only

DOA CARS Security Officer: _____ Date: _____

Signature: _____

DOA DBA Security Officer: _____ Date: _____

Signature: _____