



**Integrated Transportation Information Management System (ITIMS)**

**Road Inventory Field Data System (RIFDS) Module**

**Non-Federal Government**

**UserID/Password Request Form**

Applicant Name: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Title: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Organization/Tribe Name: \_\_\_\_\_ Organization Code (if applicable): \_\_\_\_\_

Work Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

User is Requesting Access to the following locations. Use the 6 code if known otherwise use federal recognized tribal name:

\_\_\_\_\_

*(List all that apply. If applicant requires access to multiple locations, applicant must get the authorization from all of the tribal entities authorized representatives prior to issuance of access to each location. Access will only be granted to locations where this authorization is provided)*

Type of Access:

**INVENTORY (RIFDS)**

	Read Only (Browse)
	Field

Authorizing Officials Name/Title: \_\_\_\_\_

Authorizing Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*By signing this sheet the authorizing officials agree that they will notify the appropriate BIA Regional Transportation office responsible for that Tribe's location or someone at the BIA/DOT when this individual is no longer representing this entity or is no longer authorized to provide information on the behalf of the entity.*

User Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The userID/Password issued for your exclusive use, allows access to BIA Information Systems and computers. Do not share them with anyone or do not use them for other than official government business. Unauthorized use of Government computers is a criminal offense and violations are prosecutable under federal law (Public Law 99-474). Sign & forward to authorizing agents for signature, and return this form to: Division of Transportation(ABQ), 1001 Indian School Rd NW, Room 227, Albuquerque, NM 87104. This information is collected according to the Privacy Act and DOI-(OS-58). The user acknowledges that they will be required to take and pass the DOI Cyber-Awareness Challenge(FISSA) and will adhere to the rules of behavior defined therein. The user will be required to obtain a favorable adjudication from the BIA Personnel Security office. Users will take all precautions to ensure that outputs(reports) from this system are controlled in a proper manner. Although all data contained within the system is deemed non-trust and public information.*

**BIA/DOT**

Approved Signature: \_\_\_\_\_ Date: \_\_\_\_\_

System Administrator Name/Title : \_\_\_\_\_ Date Account Was Created: \_\_\_\_\_

SA Signature: \_\_\_\_\_