## **GMS ACCESS AUTHORIZATION FORM**

Please complete the User ID Information section below. Each organization is allowed up to 3 authorized users. A separate form is required for each. Once you have completed the form, please return it to the RTP Grants Administrator at <a href="mailto:talivia.brodie@ncparks.gov">talivia.brodie@ncparks.gov</a>. Once the authorization is processed, you will receive an e-mail from NCDOT IT SAP Support Services containing your User ID and temporary password.

User ID Information

First Name:	Last Name:	
Title:		
Agency:		
Agency Billing Address:		
City, State, Zip:		
Telephone:	E-mail:	
Federal Tax ID:		
_	yet easy for you to remember" sequence of random e GMS. You will also need to provide this code if yo	
I certify the information above is Signature:	s accurate and that the Agency named above h	as appointed me as an authorized user.
<u> </u>		
<u>Thi</u>	is section to be completed by I	RTP Staff.
Partner ID:	Vendor #:	Group #:
Level of Access a	and Approval: Administrator Reviewe	er Approver Applicant
RTP Grants Administrate	or: Talivia Brodie, RTP Grants Manager Lalivia.brodie@ncparks.gov	Date:

919-707-9320

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