

**DEPARTMENT OF JUSTICE  
BUREAU OF ALCOHOL, TOBACCO, FIREARMS, AND EXPLOSIVES  
INFORMATION SYSTEMS ACCESS**

**USER IDENTIFICATION**

PRINT USER'S NAME (*Last, First, M.I.*)

POSITION

**ATF FAX NUMBER:  
404.315.4601**

DIRECTORATE  
N/A

DIVISION  
NIBIN

FIELD OFFICE OR BRANCH

EXISTING NETWORK USER ID

EXISTING MAINFRAME USER ID

SOCIAL SECURITY NUMBER (Last 4 digits)

**APPROVAL SIGNATURES**

**CHECK HERE IF NON-ATF  
EMPLOYEE**

USER'S TELEPHONE NUMBER/EMAIL  
ADDRESS

USER'S SIGNATURE

DATE

PRINT SUPERVISOR'S NAME

SUPERVISOR'S TELEPHONE NUMBER

SUPERVISOR'S SIGNATURE

DATE

**TECS**

**CHECK THIS BLOCK TO REQUEST TECS  
ACCESS**

FULL SOCIAL SECURITY NUMBER  
N/A

**CHECK HERE TO  
DELETE ALL USER  
ACCESS**

NETWORK SERVER

**ACCESS REQUESTS**

**SYSTEM OWNER USE ONLY**

SYSTEM OR APPLICATION (Client Server of Mainframe)	ACCESS ROLE	ADD ACCESS	DELETE ACCESS	NEW USER ID	SIGNATURE
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
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		<input type="checkbox"/>	<input type="checkbox"/>		

**INFORMATION SYSTEMS DIVISION USE ONLY**

COMMENTS: