

*Maintenance Action (Select Only One)		*Agency / Company Name	Assigned User ID		
Add User					
Change User					
Delete User					
BRICKS User Information					
*Capitol Facilities employee?	Yes	No			
*Name					
*Email Address					
*Phone Number					
ACE ID (State Employees Only)					
DFA Management Approval					
*Title (User Identifier)					
By approving this form, I am authorizing the above named individual to be a BRICKS user.					
Approved by				Date	
For DFA/MMRS Internal Use Only					
BRICKS Security Administrator				Date	