

Lucas County Applications Access Request Form

Instructions: New users need to register for access to the LCAPPS module before being granted access to individual programs. Contact the LCIS Help Desk for registration instructions for the LCAPPS Module. Print and complete sections 1- 3 below. Forward signed original to LCISHelpDesk@co.lucas.oh.us.

Section 1: USER INFORMATION			
Check one:			
<input type="checkbox"/> NEW USER		<input type="checkbox"/> MODIFY USER	<input type="checkbox"/> REMOVE USER
First Name	Middle Initial	Last Name	Title / Position
Department/Agency Name	Email Address	Work Phone Number	
Model access after this current user:			

Section 2: ACCESS REQUESTED				
APPLICATION	ROLES <i>Check all that apply</i>			
Financial				
Auditor	User - 1099	User - CAFR		
Auditor	User - PayIn	Admin - Payin		
Treasurer	User - Reports	Admin - Entry/Import	Admin - Warrant Formatter	
Estate Tax	User - Update/Reports	Admin - Additional Updates		
FACTS eDoc Distribution	User	Admin - Settings		
Fixed Assets	User			
FROGS Financial Reports	User			
Misc. Auditor				
Vendor/Cig License	User	Admin - Settings		
Kennel	User	Admin - Settings		
Unclaimed Funds	User			
Personal Property Tax				
Auditor	User	Admin - Additional Updates		
Treasurer	User			
Special Warrants	User - Update/View	Admin - Void	Admin - Reconcile	
TimeOff	User	List Approver's Name here -		

Section 3: SIGNATURE	
A user account will not be created or modified without the Director/Supervisor signature(s). Users are responsible to safeguard their user ID and not to share it with another user.	
User Signature:	Date:
As the manager/director of this employee, I authorize the access indicated above and I understand that any changes to this access will require additional written approval. Access requested is based on the official duties of their position.	
Print Manager Name:	Title:
Manager Signature:	Date: