- ₩ WHEN FILLING OUT THE **ACR**, CREATE THE AGENCY INFORMATION FIRST:
  - FILL OUT THE TOP PORTION (HIGHLIGHTED BELOW) AND "SAVE AS" A TEMPLATE ON YOUR PC "Last, First and Date" (04012021 format)
  - THIS WAY WHEN YOU LATER SAVE THE FILLED-OUT FORM YOU WILL SAVE IT UNDER THE EMPLOYEE'S NAME AND THE DATE YOU REQUESTED IT AS:
    - O Johnson, Jeremiah T 06012021 EXAMPLE

	Арро		North Car rision of F	rolina Facili	a Depar ity Mana 984-2	tmer agen 236-0		ty Sy	stems	M - <b>4</b> :0	0 PM
1. AG	ENCY INFORMAT	ON:							Re	ev. 1-	08/01/2021
BUILDING	COORDINATOR:				R	REQU	EST DATE				
	ENT - DIVISION:						ING NAME				
M5C# and	Zip Only:					ELEP	HUNE #				
2. SEL	SEND INVOICE	PTION: E TO REQUESTING	G AGENCY	CON	MPANY &	CENT	ER NUMBER	⇒			
	PAYMENT E PAYABLE T REQUIRED)	Y EMPLOYEE (0 O DOA OR EXA	HECK MAI CT CHANGE	ÞΕ	DATE	-	CHECK#:		RECEIPT #:		
3. COME	LETE THIS PORTI	ON FOR EACH F	ERSON. (F	Pictu	res ove	г 5 у	ears old mu	st be	updated)		9
REASON FO	R REQUEST:		EXPLANA					700			
BROKE	N LOST	STOPPED WOR	KING	ETUR	N TO W	ORK	NEW HIRE		AGENCY CHA	NGE	NAME CHANGE
FIRST		I	MIDDLE				LAST				
DEPARTI	MENT: NO ABBR	EVIATIONS					-				
	NO ABBREVIA										
	LICENSE # LAST UMBER WITH A										
	E START DATE:					ЕМЕ	LOYEE EMAIL	:			
	DECILIAD DA	AY ACCESS 6:30	AM TO 6:3	n DN				Гр	ERMANENT	ENADL	OVEE
	MONDAY THE	ROUGH FRIDAY,	NO HOLID	AYS		┖		_			
		AY ACCESS 6:3 ROUGH FRIDAY,			м,			Т	EMPORARY	EMPL	OYEE
		CCESS -24 HOUDES HOLIDAYS		7 DA	YSA			В	OARD OR C	OMMI	SSION MEMBER
		RD EXPIRATION FOR: Temps, In	N DATE: terns and Contractors*					С	CONTRACTOR *requires picture*		
	START DATE							II	NTERN		
ACCESS NE	EDED:										
ADDITION	AL INSTRUCTIONS	5:									
5. SECUE	APPROVED BUIL	VILL CONTACT	EACH PE	RSOI	o.assetw N TO SO	HED	cloud/ready ULE AN APP	OINT	MENT FOR A	N ACC	CESS CARD.
Signa	ture:	e.gov/about-do	adivisions	racilit	iy-manag	jeme		onal g Dat		a Infor	mation.
WORK	ORDER NUMBER	<u> </u>		Т		T	MATCH NU	JMBE	R:		
	OMPLETED BY:					+	COMPLETIO				
C											
	#9201		913	+	#919	_	#91			0.00	INI-PROX DISC

- **♣** SECTION 2 PAYMENT OPTIONS:
  - THERE ARE (2) WAYS OF PAYING FOR A BADGE, LANYARD OR MINIPROX
    - AGENCY PAY HIGHLIGHTED BELOW IN YELLOW A COMPANY AND CENTER NUMBER ARE REQUIRED OR THE REQUEST CAN BE REJECTED
    - EMPLOYEE PAY HIGHLIGHTED BELOW IN ORANGE THE BUILDING COORDINATOR MUST INFORM THE EMPLOYEE THAT THEY ARE RESPONSIBLE FOR PAYMENT

Арр	Division of	Facility Mana 984-2	tment of Administ agement-Security 36-0460 9:00 AM - 11:00 A					
1. AGENCY INFORMA	ATION:			Rev. 1-08/01/2021				
BUILDING COORDINATOR	t:	R	EQUEST DATE					
DEPARTMENT - DIVISION	1:		UILDING NAME					
VISC# and Zip Only:	10000000	-	ELEPHONE #					
2. SELECT PAYMENT	OPTION: ICE TO REQUESTING AGENCY	COMPANY &	CENTER NUMBER -					
	-							
PAYMENT PAYABLE REQUIRE	T BY EMPLOYEE (CHECK MA E TO DOA OR EXACT CHANG ID)	DE DATE	: CHECK#:	RECEIPT #:				
3. COMPLETE THIS PO	WHEN CHECKING	BOXES V		be updated)				
BROKEN LOST	CAN USE THE			AGENCY CHANGE NAME CHANGE				
IRST	"SPACEBAR" OR			AGENCI CIDITOL				
****	(RETURN							
DEPARTMENT: NO AI	(KLIOKIV	KLIJ						
ORIVER'S LICENSE # LAS	ST (4) ONLY:							
HONE NUMBER WITH	AREA CODE:							
MPLOYEE START DATE	E: * required*		EMPLOYEE EMAIL:					
	REGULAR DAY ACCESS 6:30 AM TO 6:30 PM, PERMANENT EMPLOYEE							
EXTENDED	MONDAY THROUGH FRIDAY, NO HOLIDAYS  EXTENDED DAY ACCESS 6:30 AM TO 10:30 PM,  TEMPORARY EMPLOYEE							
UNLIMITED	THROUGH FRIDAY, NO HOLID DACCESS -24 HOURS A DAY CLUDES HOLIDAYS			BOARD OR COMMISSION MEMBER				
ACCESS	CARD EXPIRATION DATE: ED FOR: Temps, Interns and C	ontractors*		CONTRACTOR *requires picture*				
START DATE				INTERN				
ACCESS NEEDED:								
ADDITIONAL INSTRUCTIO	NS:							
4. ONLY APPROVED BU	UILDING COORDINATORS	ARE AUTHOR	RIZED TO SUBMIT A	COMPLETED REQUEST FORM				
5. SECURITY SYSTEMS			orks.cloud/ready HEDULE AN APPOII	NTMENT FOR AN ACCESS CARD.				
6. GO TO https://rcadmin	n.nc.gov/about-doa/divisions	/facility-manag	ement for additiona	guidelines and information.				
Signature:	(8(3))		Da	ate:				
WORK ORDER NUMB	ER:		MATCH NUM	IBER:				
COMPLETED BY:			COMPLETION	DATE:				
PROX CARD	LANYARD CLIP COMDO	CLIP ONLY	LANYARD ON #9190	MINI-PROXIDISC #9221				
#9201	#9913	#919						

- **♣** SECTION 3 EMPLOYEE INFORMATION:
  - COMPLETE ALL CORRECT HIGHLIGHTED BLOCKS AS NEEDED
  - SMALL BOXES WILL SHOW A CHECK MARK SEE INFO TEXT BUBBLE
  - LARGE BOXES WILL NEED TYPED INFORMATION
  - DATE BLOCKS ARE REQUIRED TO BE FILLED OUT

#### USING THE TAB KEY WILL MOVE ACROSS THE BLOCKS FROM LEFT TO RIGHT IN ROWS

	Appoin	North Car	ACCESS CARD folina Departmo facility Manage 984-236 y-Thursday 9:1	ent of Adminis ment-Security 0460	Systems	4:00 PM		
1. AGEN	CY INFORMATIO	WHEN CHECK	ING BOXES	YOU	Rev. 1	1-08/01/2021		
	OORDINATOR:		HE "MOUSE	, =				
M5C# and Zip		"SPACEBAR"		, III				
2. SELEC	T PAYMENT OP		RN KEY)	<u> </u>	6 9 9 9			
	SEND INVOICE	(1111)	,	F =	<b>&gt;</b>			
	PAYMENT BY PAYABLE TO REQUIRED)	PEMPLOYEE (CHECK MALE) DOA OR EXACT CHANGE	DATE:	CHECK#:	RECEIPT #:			
3. COMPLE	TE THIS PORTIO	N FOR EACH PERSON. (F	ictures over 5	years old mus	t be updated)			
REASON FOR R		EXPLANA						
BROKEN	LOST		ETURN TO WOR		AGENCY CHANG	NAME CHANGE		
FIRST		MIDDLE		LAST				
	NT: NO ABBRZ							
	IO ABBREVIATI			<u> </u>				
	CENSE # LAST (							
	MBER WITH AR		-					
EMPLOYEES	START DATE: *	required*	El	PLOYEE EMAIL:				
	REGULAR DAY ACCESS 6:30 AM TO 6:30 PM, MONDAY THROUGH FRIDAY, NO HOLIDAYS  PERMANENT EMPLOYEE							
	EXTENDED DA	LY ACCESS 6:30 AM TO 10 OUGH FRIDAY, NO HOLID	30 PM,		TEMPORARY EM	PLOYEE		
	UNLIMITED AC	CESS -24 HOURS A DAY, DES HOLIDAYS			BOARD OR COMMISSION MEMBER			
ACCESS CARD EXPIRATION DATE: *REQUIRED FOR: Temps, Interns and Contractor					CONTRACTOR *requires picture*			
	START DATE				INTERN			
ACCESS NEED	DED:							
	INSTRUCTIONS:							
4. ONLY AF	PROVED BUILT	DING COORDINATORS	ARE AUTHORIZE	D TO SUBMIT	COMPLETED REG	UEST FORM		
5 SECTION	V SYSTEMS WI	https LL CONTACT EACH PE	//sonc.assetwork		INTMENT FOR AN A	CCESS CAPD		
2000	ttps://readmin.ne	gov/about-doa/divisions				No. of the Contract of the Con		
Signatu	ıre:	((4(3))		D	ate:			
WORK OR	DER NUMBER:			MATCH NUI	ИBER:			
COM	PLETED BY:			COMPLETION				
	OX CARD	LANYARD CLIP COMBO	CLIP ONLY	LANYARD O	NLY	MINI-PROX DISC		
	9201	#9913	#9192	#919		#9221		

- ♣ SECTIONS 4, 5 AND 6 THESE ARE INFORMATIONAL IN NATURE AND HAVE LINKS TO THE ReaDY PORTAL
  - THE **SIGNATURE AND DATE BLOCKS** BELOW THESE SECTIONS ARE FOR WHEN THE EMPLOYEE PICKS UP THE ACCESS BADGE **HIGHLIGHTED IN YELLOW**

#### ALL INFORMATION BELOW THE SIGNATURE LINE IS FOR BADGE OFFICE STAFF USE ONLY

	Appoint	ment Hours	: Tuesda	y-Th	984-23 ursday 9			AM and 2:	00 PM - 4:00 PM	
1. AGENCY I	NFORMATION	V:							Rev. 1-08/01/2021	
BUILDING COORI	DINATOR:				RE	QUE	ST DATE			
DEPARTMENT -							NG NAME			
MSC# and Zip Or	ily:				TE	LEPH	ONE #			
2. SELECT PA	AYMENT OPTI	ON:		1 11			. 1276 1 4	0.00		
SI	END INVOICE TO	REQUESTING	AGENCY	CON	IPANY & C	ENTER	NUMBER	<b>&gt;</b>		
	PAYMENT BY E PAYABLE TO D REQUIRED)	EMPLOYEE (C DOA OR EXAC	HECK MAI T CHANGE	ÞΕ	DATE:		CHECK#:	RECE	IPT #:	
3. COMPLETE 1	THIS PORTION	FOR EACH P	ERSON. (F	Pictu	res over	5 yea	ers old mus	t be upda	ted)	
REASON FOR REQU	JEST:		EXPLANA	TION						
BROKEN	LOST SI	OPPED WOR	KING F	ETUR	N TO WO	RK	NEW HIKE	AGENC	CHANGE NAME CHA	NGE
IRST		ı	MIDDLE				LAST			
DEPARTMENT:										
DIVISION: NO A DRIVER'S LICEN										
PHONE NUMBE										
EMPLOYEE STA	RT DATE: * r	equired*				EMPL	OYEE EMAIL:			
	EGULAR DAY					Т		PERMA	NENT EMPLOYEE	$\neg$
	MONDAY THROUGH FRIDAY, NO HOLIDAYS  EXTENDED DAY ACCESS 6:30 AM TO 10:30 PM,  TEMPORARY EMPLOYEE									$\dashv$
M	ONDAY THRO	UGH FRIDAY,	NO HOLID	AYS		_				
	NLIMITED ACC EEK. INCLUDE		RS A DAY	7 DA	YSA	100		BOARD	OR COMMISSION MEMBE	.R
	ACCESS CARE REQUIRED FO			ontrac	ctors*			CONTRA	ACTOR *requires picture*	
STA	RT DATE							INTERN	i e	
ACCESS NEEDED:		4								
ADDITIONAL INS										
ADDITIONAL INS	TROCHOIS:									
4 ONLY ARES	OVED DIM S	No coope	NATORO	ADE	ALITUSE:	1755	TO SUBMIT		TED DECUIERY SCOU	
			https	://san	c.assetwo	rks.cl	oud/ready		TED REQUEST FORM	
				577					FOR AN ACCESS CARD.	
	DINKE	gov/about-do	adivisions	/facilit	y-manage	ement	tor addition	al guideline	es and information.	
Signature	e:						U	ate:		
WORK ORDER	R NUMBER:						MATCH NU	MBER:		
COMPLET	ED BY:						COMPLETION	DATE:		
PROX C		LANYARD C		1	CLIP ONLY	F	LANYARD ONLY		MINI-PROX DISC	
#920	J1	#9	913		#9192	2	#919	0	#9221	

### **EXAMPLE OF A FILLED-OUT FORM BELOW:**

# ACCESS CARD REQUEST North Carolina Department of Administration Division of Facility Management-Security Systems 984-236-0460

Appointment Hours: Tuesday-Thursday 9:00 AM - 11:00 AM and 2:00 PM - 4:00 PM

1. AGENCY INFORMATION: Rev. 4 – 03/03/2021

DEPARTMENT - DIVISION: FACILITY MANAGEMENT BUILDING NAME FACILITY MANAGEMENT BUILDING MSCB and Zip Only: 1313 TELEPHONE # 884-238-XXXX  2. SELECT PAYMENT OPTION:	BUILDING CO	ORDINATOR:	DONNA C	COMBS		REQUEST DATE			06/01/2021				
2. SELECT PAYMENT OPTION:  SEND INVOICE TO REQUESTING AGENCY  PAYMENT BY EMPLOYEE (CHECK MADE PAYABLE TO DOOR OF EACH PERSON. (PICTURES OVER 5 YEARS OF THE PAYABLE TO DOOR OF EACH PERSON.)  3. COMPLETE THIS PORTION FOR EACH PERSON. (PICTURES OVER 5 YEARS OF THE PAYABLE TO DOOR OF EACH PERSON.)  BROKEN LOST STOPPED WORKING RETURN TO WORK PILEW HIRE AGENCY CHANGE RAME CHANGE FIRST JEREMIAH MIDDLE T. LAST JOHNSON  DEPARTMENT: NO ABBREVIATIONS DEPARTMENT OF ADMINISTRATION  DIVISION: NO ABBREVIATIONS FACILITY MANAGEMENT  DRIVER'S LICENSE # LAST (4) ONLY: NC 7851  PHONE NUMBER WITH AREA CODE: 919-465-1111  EMPLOYEE START DATE: "REQUIRED TO SECURITY MANAGEMENT OF THE PROPERTY OF THE PAYABLE PROPERTY	DEPARTMENT				EMENT								
SEND INVOICE TO REQUESTING AGENCY  COMPANY & CERTER NUMBER  13.XXXX.XX  PAYMENT BY ENPLOYEE ICHECK MADE PAYABLE TO DOA OR EACT CHANGE  PAYABLE TO DOA OR EACT CHANGE  ATE: CHECK#: RECEIPT#:  3. COMPLETE THIS PORTION FOR EACH PERSON. (Pictures over 5 years old must be updated)  REASON FOR REQUEST: EXPLANATION  BROKEN LOST STOPPED WORKING RETURN TO WORK INLEW HINE AGENCY CHANGE NAME CHANGE  IRRST JEREMIAH MIDDLE T. LAST JOHNSON  DEPARTMENT: NO ABBREVIATIONS  PAGENTY MANAGEMENT  DIVISION: NO ABBREVIATIONS FACILITY MANAGEMENT  DIVISION: NO ABBREVIATIONS FACILITY MANAGEMENT  DRIVER'S LICENSE # LAST (4) ONLY: NC 7851  PHONE NUMBER WITH AREA CODE: 919-455-1111  EMPLOYEE START DATE: " required" BOUY2021  EMPLOYEE EMAIL   Illorison@doa.nc.gov  REGULAR DAY ACCESS 430 AM TO 6:30 PM, MONDAY THROUGH FRIDAY, NO HOLIDAY'S  WOMONAY THROUGH FRIDAY, NO HOLIDAY'S  PERMANENT EMPLOYEE  MONDAY THROUGH FRIDAY, NO HOLIDAY'S  WOMONAY THROUGH FRIDAY, NO HOLIDAY'S  WOMONAY THROUGH FRIDAY, NO HOLIDAY'S  ACCESS CARD EXPRATION DATE:  ACCESS NEEDED:  ALL BUILDINGS AND DOCKS INCLUDING PARKING DECKS  ADDITIONAL INSTRUCTIONS:  INCLUDE ANY ELEVATOR AND HOOF ACCESS  4. ONLY APPROVED BUILDING COORDINATORS ARE AUTHORIZED TO SUBMIT A COMPLETED REQUEST FORM  MIDDLY SON. ASSESSMENTS, GIVING READ AND POINTMENT FOR AN ACCESS CARD.  6. GO TO https://rcadmin.ac.gov/about-doadvivisions/facility-management for additional guidelines and information.  Signature:  WORK ORDER NUMBER:  210306-009272  MATCH NUMBER:  44753938  MONEY MACOUNT MAC	M5C# and Zip	Only:	1313			TELEPHONE #		984-236-XXXX					
PAYMENT BY EMPLOYEE ICHECK MADE PAYABLE TO DOA OR EXACT CHANGE PRESSON FOR REQUEST:  EXPLANATION  BROKEN  LOST SIUPPED WORKING PRESSON FOR REQUEST:  EXPLANATION  DEPARTMENT: NO ABBREVIATIONS  DEPARTMENT: NO ABBREVIATIONS  FACLITY MANAGEMENT  DIVISION: NO ABBREVIATIONS  FACLITY MANAGEMENT  DRIVER'S LICENSE # LAST (4) ONLY: NO T881  PHONE NUMBER WITH AREA CODE: PROVINCE START DATE: PROVI	2. SELECT	T PAYMENT OF	TION:										
PAYABLE TO DOA OR EXACT CHANGE  PROGRETS  3. COMPLETE THIS PORTION FOR EACH PERSON. (Pictures over 5 years old must be updated)  REASON FOR REQUEST:  EXPLANATION  BROKEN  LOST  STOPPED WORKING  RETURN TO WORK  NEW HIRE  AGENCY CHANGE  PRAME CHANGE  FIRST JEREMIAH  MIDDLE T.  LAST JOHNSON  DEPARTMENT: NO ABBREVIATIONS  DEPARTMENT: NO ABBREVIATIONS  DEPARTMENT: NO ABBREVIATIONS  PROVIDENCE: LICENSE # LAST (4) ONLY:  NO REST  DIVISION: NO ABBREVIATIONS  PROVIDENCE: LICENSE # LAST (4) ONLY:  PROVIDENCE: LICENSE # LAST (4) ONLY:  NO REST  MONIDAT THROUGH FROM TO 6:30 PN.  REGULAR DAY ACCESS 6:30 AM TO 6:30 PN.  REGULAR DAY ACCESS 6:30 PN.  REGULAR DAY	<b>✓</b>	SEND INVOICE	TO REQUESTIN	NG AGENCY	COMPANY	& CENTER NUMBER ⇒ 13.			XXXX-XX				
REASON FOR REQUEST: EXPLANATION  BROKEN LOST STOPPED WORKING RETURN TO WORK NEW HIRE AGENCY CHANGE NAME CHANGE  FIRST JEREMIAH MIDDLE T. LAST JOHNSON  DEPARTMENT: NO ABBREVIATIONS DEPARTMENT OF ADMINISTRATION  DIVISION: NO ABBREVIATIONS FACLITY MANAGEMENT  DRIVER'S LICENSE # LAST (4) ONLY: NO 7681  PHONE NUMBER WITH AREA CODE: 919-865-1111  EMPLOYEE START DATE: * required* 6601/2021 EMPLOYEE EMAIL: Nonnongedoa.no.gov  REGULAR DAY ACCESS & 30 AM TO 6:30 PM, MONDAY THROUGH FRIDAY, NO HOLIDAYS  RESTENDED DAY ACCESS \$-20 AM TO 6:30 PM, MONDAY THROUGH FRIDAY, NO HOLIDAYS  WEEK INCLUDES HOLIDAYS  ACCESS CARD EXPRATION DATE: *REQUIRED FOR: Temps, Interns and Contractors*  START DATE (6/01/2021 INTERN  ACCESS NEEDED: ALL BUILDINGS AND DOCKS INCLUDING PARKING DECKS  ADDITIONAL INSTRUCTIONS: INCLUDE ANY ELEVATOR AND HOOF ACCESS  4. ONLY APPROVED BUILDING COORDINATORS ARE AUTHORIZED TO SUBMIT A COMPLETED REQUEST FORM INTER/Signo. 365-86 Works of objective of the strength		PAYABLE TO				TE:	CHECK#:		CEIPT #:				
BRDKEN LOST SIOPPED WORKING RETURN TO WORK IN NEW HIRE AGENCY CHANGE NAME CHANGE FIRST JEREMIAH MIDDLE T. LAST JOHNSON  DEPARTMENT: NO ABBREVIATIONS DEPARTMENT OF ADMINISTRATION DIVISION: NO ABBREVIATIONS FACILITY MANAGEMENT  DIVISION: NO ABBREVIATIONS  FACILITY MANAGEMENT  DIVISION: NO ABBREVIATIONS  FACILITY MANAGEMENT  DIVISION: NO ABBREVIATIONS  FACILITY MANAGEMENT  FEMPLOYEE EMAIL: Normon@doa.nc.gov  PERMANENT EMPLOYEE  MONDAY THROUGH FRIDAY, NO HOLIDAYS  MONDAY THROUGH FRIDAY, NO HOLIDAYS  MONDAY THROUGH FRIDAY, NO HOLIDAYS  WEEK INCLUDES 2-24 HOURS A DAY, 7 DAYS A  WEEK INCLUDES 3-24 HOURS A DAY, 7 DAYS A  WEEK INCLUDEAN PRIDAY, NO HOLIDAYS  ACCESS CARD EXPRATATION DATE:  "REQUIRED FOR: Temps, Interns and Contractors"  ACCESS NEEDED:  ALL BUILDINGS AND DOCKS INCLUDING PARKING DECKS  ADDITIONAL INSTRUCTIONS:  INCLUDE ANY ELEVATOR AND HOOF ACCESS  4. ONLY APPROVED BUILDING COORDINATORS ARE AUTHORIZED TO SUBMIT A COMPLETED REQUEST FORM  INDEX///sono.assetworks.cioud/leadyy  5. SECURITY SYSTEMS WILL CONTACT EACH PERSON TO SCHEDULE AN APPOINTMENT FOR AN ACCESS CARD.  6. GO TO https://roadmin.nc.gov/about-doa-divisions/facility-management for additional guidelines and information.  Signature:  WORK ORDER NUMBER:  COMPLETED BY:  MACH NUMBER:  LANYARD COLV.*  MID-PROX CARD	3. COMPLET	TE THIS PORTIO	N FOR EACH	PERSON. (P	ictures o	ver 5 yea	ers old mu	st be upd	lated)				
DEPARTMENT: NO ABBREVIATIONS DEPARTMENT OF ADMINISTRATION DIVISION: NO ABBREVIATIONS DIVISION: NO ABBREVIATION D	REASON FOR R	EQUEST:		EXPLANAT	XPLANATION								
DEPARTMENT: NO ABBREVIATIONS DIVISION: NO ABBREVIATIONS DIVISION: NO ABBREVIATIONS DIVISION: NO ABBREVIATIONS DIVISION: NO ABBREVIATIONS DRIVER'S LICENSE # LAST (4) ONLY: NO 7861 PHONE NUMBER WITH AREA CODE: EMPLOYEE START DATE: * required* DRIVER'S LICENSE # LAST (4) ONLY: NO 7865-1111 EMPLOYEE START DATE: * required* DRIVER'S LICENSE # LAST (4) ONLY: DRIVER'S LICENSE # LAST (	BROKEN	LOST	TOPPED WO	KKING RI	ETURN TO	WORK 🗸	NEW HIKE	AGEN	ICY CHANGE NAME CHANGE				
DIVISION: NO ABBREVIATIONS DRIVER'S LICENSE # LAST (4) ONLY: NC 7851 PHONE NUMBER WITH AREA CODE: B19-465-1111 EMPLOYEE START DATE: " required "	FIRST JER	EMIAH		MIDDLE	Γ.		LAST JOHNSON						
DRIVER'S LICENSE # LAST (4) ONLY: NC 7881  PHONE NUMBER WITH AREA CODE: 919-855-1111  EMPLOYEE START DATE: * required ** 05/01/2021	DEPARTMEN	NT: NO ABBRE	VIATIONS	DEPARTM	ENT OF AD	MINISTRA	TION						
PHONE NUMBER WITH AREA CODE: 919-855-1111  EMPLOYEE START DATE: * required* 05/01/2021 EMPLOYEE EMAIL:	DIVISION: N	O ABBREVIAT	IONS	FACILITY	MANAGEM	ENT							
EMPLOYEE START DATE: * required*	DRIVER'S LIC	CENSE # LAST	(4) ONLY:	NC 7851									
REGULAR DAY ACCESS 6:30 AM TO 6:30 PM.  MONDAY THROUGH FRIDAY, NO HOLIDAYS  EXTENDED DAY ACCESS 6:30 AM TO 16:30 PM.  MONDAY THROUGH FRIDAY, NO HOLIDAYS  UNLIMITED ACCESS -23 OAM TO 16:30 PM.  TEMPORARY EMPLOYEE  MONDAY THROUGH FRIDAY, NO HOLIDAYS  UNLIMITED ACCESS -24 HOURS A DAY, 7 DAYS A  WEEK, INCLUDES HOLIDAYS  ACCESS CARD EXPRATION DATE:  "REQUIRED FOR: Temps, Interns and Contractors"  START DATE 06/01/2021  ACCESS NEEDED:  ALL BUILDINGS AND DOCKS INCLUDING PARKING DECKS  ADDITIONAL INSTRUCTIONS:  INCLUDE ANY ELEVATOR AND HOOF ACCESS  4. ONLY APPROVED BUILDING COORDINATORS ARE AUTHORIZED TO SUBMIT A COMPLETED REQUEST FORM  "Ittos://sonc.assetwors.cloud/ready"  5. SECURITY SYSTEMS WILL CONTACT EACH PERSON TO SCHEDULE AN APPOINTMENT FOR AN ACCESS CARD.  6. GO TO https://roadmin.nc.gov/about-doa/divisions/facility-management for additional guidelines and information.  Signature:  WORK ORDER NUMBER: 210306-009272  MATCH NUMBER: 44753938  COMPLETED BY: MAO OFFICE USE ONLY MINI-PROX DEC	PHONE NUM	ABER WITH A	REA CODE:	919-655-11	919-655-1111								
MONDAY THROUGH FRIDAY, NO HOLIDAYS  EXTENDED DAY ACCESS 6:30 AM TO 10:30 PM, MONDAY THROUGH FRIDAY, NO HOLIDAYS  UNLIMITED ACCESS -24 HOURS A DAY, 7 DAYS A WEEK, INCLUDES HOLIDAYS  ACCESS CARD EXPRATION DATE: "REQUREDFOR: Temps, Interns and Contractors"  START DATE (06/01/2021  ACCESS NEEDED:  ALL BUILDINGS AND DOCKS INCLUDING PARKING DECKS  ADDITIONAL INSTRUCTIONS: INCLUDE ANY ELEVATOR AND HOOF ACCESS  4. ONLY APPROVED BUILDING COORDINATORS ARE AUTHORIZED TO SUBMIT A COMPLETED REQUEST FORM  "INDESS'/Sonc. assetworks. cloud/ready"  5. SECURITY SYSTEMS WILL CONTACT EACH PERSON TO SCHEDULE AN APPOINTMENT FOR AN ACCESS CARD. 6. GO TO https://roadmin.nc.gov/about-doadfivisions/facility-management for additional guidelines and information.  Signature:  WORK ORDER NUMBER: 210306-009272  MACH NUMBER: 44753938  COMPLETED BY: MAO OFFICE USE ONLY MINI-PROX DISC  MINI-PROX DIS	EMPLOYEE S	START DATE:	required*	06/01/2021		EMPL	IPLOYEE EMAIL:   IJohnson@doa.nc.gov						
EXTENDED DAY ACCESS 6:30 AM TO 16:30 PM, MONDAY THROUGH FRIDAY, NO HOLIDAYS  UNLIMITED ACCESS -24 HOURS A DAY, 7 DAYS A WEEK, INCLUDES HOLIDAYS  ACCESS CARD EXPRATION DATE:  "REQUIRED FOR: Temps, Interns and Contractors"  START DATE 06/01/2021  ACCESS NEEDED:  ALL BUILDINGS AND DOCKS INCLUDING PARKING DECKS  INCLUDE ANY ELEVATOR AND ROOF ACCESS  4. ONLY APPROVED BUILDING COORDINATORS ARE AUTHORIZED TO SUBMIT A COMPLETED REQUEST FORM INTERNSIONAL INSTRUCTIONS:  ONLY APPROVED BUILDING COORDINATORS ARE AUTHORIZED TO SUBMIT A COMPLETED REQUEST FORM INTERNSIONAL PROVINCE OF THE PROVINCE O						5860 - 5	1	PERMANENT EMPLOYEE					
WEEK. INCLUDES HOLIDAYS  ACCESS CARD EXPRATION DATE: *REQUIRED FOR: Temps, Interns and Contractors*  START DATE 06/01/2021  ACCESS NEEDED: ALL BUILDINGS AND DOCKS INCLUDING PARKING DECKS  ADDITIONAL INSTRUCTIONS: INCLUDE ANY ELEVATOR AND ROOF ACCESS  4. ONLY APPROVED BUILDING COORDINATORS ARE AUTHORIZED TO SUBMIT A COMPLETED REQUEST FORM **nttps://sonc.assetworks.cloud/ready**  5. SECURITY SYSTEMS WILL CONTACT EACH PERSON TO SCHEDULE AN APPOINTMENT FOR AN ACCESS CARD. 6. GO TO https://rcadmin.nc.gov/about-doa/divisions/facility-management for additional guidelines and information.  Signature:  WORK ORDER NUMBER: 210306-009272  MATCH NUMBER: 44753938  COMPLETED BY: MAO OFFICE USE ONLY MPLETION DATE: 06/01/2021  MINI-PROX CARD MINI-PROX DESC.		EXTENDED D	AY ACCESS 6:	30 AM TO 10:	30 PM,	60 60		TEMP	ORARY EMPLOYEE				
*REQUIRED FOR: Temps, Interns and Contractors*    START DATE 06/01/2021   INTERN    ACCESS NEEDED:   ALL BUILDINGS AND DOCKS INCLUDING PARKING DECKS     ADDITIONAL INSTRUCTIONS:   INCLUDE ANY ELEVATOR AND ROOF ACCESS     4. ONLY APPROVED BUILDING COORDINATORS ARE AUTHORIZED TO SUBMIT A COMPLETED REQUEST FORM	<b>✓</b>			BOAR	D OR COMMISSION MEMBER								
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#### **COMPANY DEPARTMENT NUMBERS AS OF 04/01/2021**

- When you are in the ReaDY Portal and creating a badge request, when you select "Agency Pay" you will be prompted by a link to enter your department company number prefix here. If you know your complete 2 digit and extension numbers for your group this is vital for the billing process to complete to fruition.
- Security Systems reserves the right to reject any request if the Company and Center numbers are not provided for an "Agency Pay" request

## **List of Two-Digit Department Numbers**

- 01 GENERAL ASSEMBLY
- 02 JUDICIAL BRANCH
- 03 OFFICE OF THE GOVERNOR
- 04 OFFICE OF THE LT GOVERNOR
- 05 SECRETARY OF STATE
- 06 OFFICE OF THE STATE AUDITOR
- 07 STATE TREASURER
- 08 PUBLIC INSTRUCTION
- 09 JUSTICE
- 10 AGRICULTURE AND CONSUMER SERVICES
- 11 LABOR
- 12 INSURANCE
- 13 ADMINISTRATION
- 14 OFFICE OF THE STATE CONTROLLER
- 15 TRANSPORTATION
- 16 ENVIRONMENTAL QUALITY
- 26 DHHS SERVICES FOR THE BLIND
- 30 DHHS MENTAL HEALTH
- 2B DHHS HEALTH SERVICES
- 40 MILITARY AND VETERANS AFFAIRS
- 41 INFORMATION TECHNOLOGY
- 43 COMMERCE
- 45 REVENUE
- 46 NATURAL AND CULTURAL RESOURCES
- 47 PUBLIC SAFETY
- 50 COMMUNITY COLLEGES
- 60 STATE BOARD OF ELECTIONS
- 67 OFFICE OF ADMINISTRATIVE HEARINGS
- 99 NON STATE GOVERNMENT
- BO BOARD OF BARBER EXAMINERS
- B1 BOARD OF COSMETIC ARTS EXAMINERS
- B2 BOARD OF OPTICIANS