

EMPLOYEE ACCESS FORM

County: _____

Employee Name: _____

Please check any/all that apply for this employee:

DOR Access

- KAVIS - Boat Access
- AVIS
- Tangibles _____
- Add to Move-It for report notifications

- Property_Tax_Roll_CY
MotorVehiclesPropertyTax

If you are not using state email as primary communication please provide the email address

Remove Access

Delete all Access

Start date: _____

Ending Date: _____

Justification/Comments: _____

(Authorizing Person)

(Telephone)

(Date Signed)