



ONEIDA INDIAN NATION POLICE ALARM ACCESS AUTHORIZATION

****PLACE AN "X" IN THE APPROPRIATE BOX****

ADD NEW USER <input type="checkbox"/>	DELETE USER <input type="checkbox"/>	UPDATE CURRENT USER <input type="checkbox"/>	NEW MICRO PROX TAG <input type="checkbox"/>
NEW MICRO PROX TAG ISSUED BY TELCO <input type="checkbox"/>		PROXY TAG # _____	

****COMPLETE EACH PORTION OF FORM IN FULL IN ORDER TO PROCESS REQUESTS ACCURATELY****

EMPLOYEE NAME _____	POSITION/TITLE _____
DATE OF REQUEST _____	EFFECTIVE DATE _____
DEPARTMENT _____	DEPARTMENT PHONE (DO NOT LEAVE BLANK) _____
LOCATION ACCESS IS NEEDED AREAS (✓ALL THAT APPLY) <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> ALL	TRANSFERRED FROM DELETE FROM TRANSFERRED LOCATION <input type="checkbox"/> YES <input type="checkbox"/> NO
X _____ DIRECTOR SIGNATURE (REQUIRED) Note: Do not need to sign below unless access to below listed locations is selected and requested.	

**** COMPLETE THIS SECTION ONLY IF ACCESS TO THE LOCATIONS LISTED BELOW IS NEEDED**
(CHECK ALL LOCATIONS THAT APPLY, WITH PROPER TIME ZONE LEVELS INDICATED FOR EACH LOCATION)**

TIME ZONES		
LEVEL 1 (24 HOUR) All Days- (POLICE & SECURITY ONLY)	LEVEL 3* (7:00 A.M. – 6:00 P.M.) Mon – Fri	LEVEL 4 (6:00 A.M. – 10:00 P.M.) All Days
LEVEL 5* (7:00 A.M. – 6 P.M.) Mon – Sat	LEVEL 6 (6:00 A.M. – 1:00 A.M.) All Days	LEVEL 7 (5:00 A.M. – 11:00 P.M.) All Days
(* NO HOLIDAY ACCESS)		

SELECT	LOCATION	LEVEL
<input type="checkbox"/>	Accommodations at DCP Cinema	
<input type="checkbox"/>	Annex – Main Street, Oneida	
<input type="checkbox"/>	Atunyote Clubhouse	
<input type="checkbox"/>	Bonded Warehouse (Lenox Ave)	
<input type="checkbox"/>	Cogen Plant	
<input type="checkbox"/>	Commissary	
<input type="checkbox"/>	Communications Offices (Mailroom)	
<input type="checkbox"/>	Dream Catcher Plaza – Admin. Offices	
<input type="checkbox"/>	Dome Clubhouse (Sportsplex)	
<input type="checkbox"/>	Other: _____	

SELECT	LOCATION	LEVEL
<input type="checkbox"/>	Oneida Heritage; Sherrill	
<input type="checkbox"/>	Maple Leaf Market # _____	
<input type="checkbox"/>	Member Benefits; Main Street, Oneida	
<input type="checkbox"/>	Pleasant Knolls	
<input type="checkbox"/>	Sandstone Hollow	
<input type="checkbox"/>	SavOn # _____	
<input type="checkbox"/>	Shenendoah Clubhouse	
<input type="checkbox"/>	Team Member Store	
<input type="checkbox"/>	TSCR Executive Parking; Chiller Bldg	
<input type="checkbox"/>	Other: _____	

X _____
COO or Group Directors Signature _____ **Date** _____

****CHIEF OF POLICE****

X _____
Chief of Police _____ **Date** _____

****ALARM TECHNICIAN USE ONLY****

Card # _____ Position # _____ Ram IV Database Update Fax Sent

X _____
Alarm Technician Signature _____ **Date** _____ **Additional Notes:** _____

****POLICE OFFICER USE/INFORMATION ONLY****

Alarm Training Needed: Yes No Proxy Tag Delivery Only Passcode Delivery Only Proxy & Passcode Delivery

X _____
Training Officer Signature _____ **Date** _____

X _____
Received by _____ **Date** _____