

Spokane Regional Plan Center – USER I.D. UPDATE

Email to membership@plancenter.net or fax to 509-328-7279.

1 Complete this form for any of the following changes to employee User ID's:

___ New Employee Additions (*section 3*)

___ Remove Employee(s): _____

___ Change Existing Employee Username, Password, or Email (*section 3*)

___ Change Administrative Contact (*section 2*)

Company Name: _____

Authorized by: _____ Date: _____

Phone #: _____ Fax #: _____

2 ADMINISTRATIVE CONTACT (*person designated to authorize all future User ID Updates*)

First Name: _____ Last Name: _____

Username: (*first initial followed by last name, no space*) _____

Password: (*5+ digits, alpha/numeric, no symbols or spaces*) _____

Email Address: _____

This Section Only Required for Change of Administrative Contact

3 ADDITIONAL USERS (*must be employed by member company*)

- Email addresses are required for Nightly Email Updates and Addenda Notification.
- *Usernames: first initial followed by last name (*add middle initial when necessary*)
- **Passwords: duplications will not be accepted (*5+ digits, alpha/numeric, no symbols or spaces*)

| <u>First Name</u> | <u>Last Name</u> | <u>Username*</u> | <u>Password**</u> | <u>Email Address</u> |
|-------------------|------------------|------------------|-------------------|----------------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
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| _____ | _____ | _____ | _____ | _____ |

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|------------------------|------------------------------------|---------------------------|--|
| ADMIN AREA (3-6-14) | Date Completed: _____ by: _____ | Member Notified: _____ | Rec'd Via: <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Walk-in |
|------------------------|------------------------------------|---------------------------|--|