REQUEST

Use of the __HYDRAULIC__ Web Application for external user(s).

REQUESTING ORGANIZATION

Organization Name:	
Contact Name:	
Street Address 1:	
Street Address 2:	

City:		State:		Zip Code:	

Phone Number:		Fax Number:	

Email:	

USAGE AGREEMENT

All usage requests must be made by the contact person for the organization.

THE REQUESTING ORGANIZATION LISTED ON THIS REQUEST CONFIRMS THAT THE WEB APPLICATION USAGE FURNISHED BY VDOT WILL ONLY BE USED IN CONJUNCTION WITH PROJECTS ASSOCIATED WITH VDOT OR THOSE WHICH WOULD ULTIMATELY COME UNDER VDOT'S JURISDICTION. THE REQUESTING ORGANIZATION ALSO ACCEPTS THE FOLLOWING CONDITIONS

- o VDOT assumes no responsibility for the use/misuse of this software product. The application of this software product is the sole responsibility of the user and the requesting organization.
- o There are no expressed or implied warranties.
- o In no event will VDOT be liable for any loss of use, interruption of business, or any direct, indirect, special, incidental, or consequential damages of any kind (including lost profits) regardless of the form of action whether in contract, tort (including negligence), strict product liability or otherwise.
- o No user support for this software will be provided by VDOT.
- o The usage of this application is not to be shared outside the requesting organization.

_____
(Signature of contact from requesting organization)

JUSTIFICATION FOR USAGE

The justification must include the active projects that are associated with the Virginia Department of Transportation.

USER LIST

Each user will be assigned a unique ID and Password. The individual user will be able to change their password once they are granted access to the Web Application.

Please fill in the following information for each person in your organization that is seeking usage of this Web Application. The Email address will be used to convey the User's Id and Password.

User Name:	Email:
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	

INTERNAL USE

I certify that the requesting organization has a valid justification for usage of the <u>HYDRAULIC</u> Web Application as specified in this request.

_____
(State Hydraulics Engineer or his representative)

ITD-36

VDOT INFORMATION
SECURITY AGREEMENT

I, _____, an employee/contractor of the Commonwealth of Virginia Department of Transportation (VDOT), acknowledge that I have been granted access to the automated systems, including licensed software, hardware, and data of VDOT.

I further acknowledge that the data contained in and accessed using the information systems and network of VDOT, the information systems at the Department of Information Technology, and any other automated system which I use in the course of performing my duties is the property of the Commonwealth of Virginia. This includes <u>all</u> systems and data used, regardless of where the system or data resides, to conduct the business of VDOT. Although I have access to data I shall not read, disclose, provide, or otherwise make available, in whole or in part, such information other than to other employees or consultants of (VDOT) to whom such disclosure is authorized. Such disclosure shall be in confidence for purposes specifically related to the business of VDOT and the Commonwealth.

I agree that logon Ids and passwords are not to be shared among employees. If I must share my logon ID or password while getting help or troubleshooting a problem, I understand it is my responsibility to change my password immediately after receiving this help.

I understand and agree that all computer resources and equipment are the property of VDOT and are to be used for official business only, and are not for personal use. I understand that VDOT reserves the right to monitor, access and disclose at its discretion any communications using its system and therefore I should have no expectation of privacy. I also understand it is my responsibility to protect the data and systems from damage or destruction, both tangible and intangible.

I agree that my obligations with respect to the confidentiality and security of all information disclosed to me shall survive the termination of any agreement, relationship, or employment with VDOT.

I shall take all appropriate action, whether by instruction, agreement or otherwise, to ensure the protection, confidentiality and security of the information and automated systems, to satisfy my obligations under this Agreement. I will perform my duties with quality and integrity, in a professional manner, and in keeping with established standards. I will report all violations of information security immediately to my supervisor and the Information Security Officer.

I acknowledge that I have read and will comply with the VDOT Information Security Policy and the Internet Usage Policy dated 3/00. Use of the computer resources and equipment with knowledge of these policies will be deemed consent to these policies. This Agreement shall be interpreted in accordance with the laws of the Commonwealth of Virginia.

ACKNOWLEDGED:

_____   _____
Name (Print)   **Date**

_____
Signature

_____   _____
Witness   **Date**