

Instructions

This packet contains four documents to be completed as follows.

- <u>Departmental request for non-employee remote access</u> To be completed by the appropriate CITY OF BOTHELL Department Director.
- <u>Information Services Conditions of Use</u> To be completed by the CITY OF BOTHELL Information Services staff person initiating remote access process.
- <u>Vendor Application and Agreement</u> To be completed by the person who will be accessing the system remotely.
- <u>Vendor Supervisor Agreement</u> To be completed by the applicant's direct supervisor.
- <u>Information Security Administrative Order Acknowledgement (separate attachment)</u> Every employee, vendor, contract, or any other approved person is required to read the 'User Responsibility' section of the City of Bothell Information Security Administrative Order and sign the 'employee acknowledgement' page at the end of the document.

Incorrectly completed documents will be rejected and must be resubmitted. All pages documents must be included for approval.



Departmental request for non-employee remote access

To be completed by: A CITY OF BOTHELL DEPARTMENT DIRECTOR

Requestor Information		
First Name:	Last Name:	
Department:	Title:	
Section 2: Vendor Information	n(To be completed by City of Bothell Department Dir	ector)
Company Name:		
Company Address:		
Purpose of Remote Access		
Briefly describe the need for r	remote access.	
Contract Information		
A current professional services	s contract does does exist.	
Signature:	Date:	



Information Services Conditions of use

To be completed by: CITY OF BOTHELL INFORMATION SERVICES STAFF

-	Hours of Operation
The Appli	cant shall be able to access the City of Bothell network During normal business hours only
	Approval must be obtained before each Access attempt.
	7 days a week, 24 hours a day except during scheduled backup periods
()	Weeknights from 11:55 p.m. to 4:30 a.m.), and during periods of maintenance.
Installatio	on/Software
lt	will be the
	☐City's ☐User's
re	sponsibility to provide software required for remote access. The software required
	ill be: Virus Protection and Personal Firewall
Business	Relationship Requirements Met
	Professional Services Contract
	Liability Insurance Certificate
Request	Process Requirements Met
	Department Director Approval
Documer	ntation Requirements



Vendor Application and Agreement

To be completed by: PERSON REQUESTING REMOTE ACCESS

Applicant (User) Information				
First Name:	Last Name:			
Company Name:				
Company Address:		_		
Title:	Email:	_		
Phone:	Secondary Phone:	_		
Fax:				
Please check one: Contractor Tech Su Please check one: New Remote Access Us	upport Other: ser Existing Remote Access User			
Purpose of Remote Access				
Briefly describe purpose of or need for remote access to the City of Bothell network.				

User Agreement

1.	 I understand that I am not to share Remote Access phone numbers, logins and password with anyone; even if I believe the individual requesting the information has already been approved for Remote Access. It is my responsibility, as a Remote User to safeguard the security of my Remote Access Login and password information. 		
	The motor colors and passing a mineral control of the motor colors and t	User Initials:	
2.	I understand that I am responsible for ensuring that no unauthorized p an open remote session from my workstation. Unauthorized personne person or entity other than myself.		
	,	User Initials:	
3.	I understand that I am responsible for ensuring that Remote Access use and legal manner.	e is conducted in a prope	
		User Initials:	
4.	I understand that any and all Information accessed, via Remote Access Business only and is to not be done via any public location network.	, is intended for City	
	business only and is to not be done via any public location network.	User Initials:	
5.	I understand that I am required to have current virus software and win active on any workstation I use to remotely access the City of Bothell n		
		User Initials:	
6.	I have read and understand the City of Bothell's Security Administrative	e Order.	
		User Initials:	
Termi	nation		
This ag	greement may be terminated without cause by the City of Bothell and wi	thout notice to User.	
l,	, accept and understand the terms of this agr	reement.	
Signat	ure of User Dated		



Vendor Supervisor Agreement

To be completed by: APPLICANT'S IMMEDIATE SUPERVISOR

Supervisor Agreement

As immediate supervis access the City of Both	sor to nell's network.	, I authorize his/her applic	ation to remotely
the employee so that E		ne City of Bothell when employmer count and that this agreement ma otice to User.	
I,understand the terms)	, accept and
Signature of Superviso		 ated	