## <u>Instructions to Complete Water Sector Program – Phase 2 User Access Request Form</u>

The WSP – P2 User Access Form must be downloaded and saved to your computer; then reopened in <u>Acrobat Reader</u> where you will complete it electronically and add a digital signature. Submit completed and digitally signed form to <u>Traci.Watts@la.gov</u> for processing.

Access Type:	Indicate the type of access being requested. Only a system employee, board member, or
	elected official can request "Creator" or "Creator/Submitter" access. A user with "Creator"
	access can create and/or edit an application. A user with "Creator/Submitter" access can
	create, edit, and/or submit an application for consideration. Every entity must request and be
	approved for at least one user to have "Creator/Submitter" access in order to submit an
	application for consideration. A user with "Consultant/Engineer" access can only create
	and/or edit an application; this user cannot submit an application for consideration.
System Name:	Enter the name of the system/entity.
System Category:	Mark "water" or "sewer" to indicate which category of system is involved. If both sewer and
	water are operated by the entity, then mark both.
System Type:	Enter the name of the system type from the following: Tribal, municipal, or private-not for
	profit. Please note that private-for profit systems are not eligible applicants.
LDH Region Number:	Enter the LDH region where the system(s) is located.
System FEIN/Tax ID:	Enter the federal tax identification number for the system.
PWS ID and/or DEQ	Enter the PWS ID number(s) for the water system(s) and/or the DEQ Agency Interest
Agency Interest	Number(s) for the sewer system(s). If the entity requesting access has multiple PWS IDs or
Number:	DEQ Agency Interest Numbers, you can enter them on the form or attach additional pages. If
	both sewer and water are marked under system category, then there should be both PWS ID
	and DEQ Agency Interest Numbers entered here.
LaGov Vendor	Enter the LaGov Vendor Number assigned by the State of Louisiana to the entity. If the entity
Number:	does not have a LaGov Vendor Number, click on the link below to begin the process to request
	a number. For more information regarding LaGov Vendor Numbers, please visit
	https://www.doa.la.gov/doa/osrap/vendor-information/
Parish:	Enter the parish(es) where the system(s) is located. If the system(s) is located in more than
	one parish, enter all applicable parish names.
Name of user:	Enter the first and last name of the person requesting access.
Last 4 SSN:	Enter the last 4 digits of the social security number of the user requesting access.
Title of user:	Enter the title of the user requesting access.
User Telephone	Enter the telephone number for the user requesting access.
Number:	
User Email Address:	Enter the email address of the person requesting access. Only one access per email address
	can be requested.
Mailing Address:	Enter full mailing address for entity including street address, city, and zip code.
Signature of user:	The user requesting access must sign the form digitally. Electronic signature is required. No
	hard copy forms with wet signatures will be processed.
Date:	Enter the date the user signs the form.
Name of Chief	Enter the name of the Chief Executive Officer of the entity. Municipalities should enter the
Executive Officer of	name of the mayor. Parishes should enter the name of the parish president. Private systems
system (printed):	should enter the name of the person that has authority to sign contracts or incur debt for the
	entity.
Title (printed):	Enter the title of the Chief Executive Officer of the entity.
Signature of Chief	The Chief Executive Officer must sign the form digitally. Electronic signature is required. No
Executive Officer of	hard copy forms with wet signatures will be processed.
system:	
Date:	Enter the date the Chief Executive Officer signs the form.
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