



Virginia Department of Planning and Budget

FATS ACCESS REQUEST FORM

Name _____ Phone _____
Last, First, MI

Email _____

Agency Name _____ Agency Code _____

Are there other agencies for which this agency is responsible? ☐ Yes ☐ No

If yes, please list the agencies in the "Special Considerations" block below.

System Access	Data Access	Signoff Authority
<input type="checkbox"/> Add	<input type="checkbox"/> Inquiry Only	<input type="checkbox"/> None
<input type="checkbox"/> Change	<input type="checkbox"/> Update	<input type="checkbox"/> Review
<input type="checkbox"/> Delete		<input type="checkbox"/> Approval

VITA LOGIN ID _____ OPD (dpb use only) _____

VITA ACCOUNT # _____ PRINT DESTINATION _____

Special Considerations:

Requesting Agency's Budget/Fiscal Officer:

Note: Twice a year, DPB will delete FATS logons that have been inactive for two years. Please notify DPB within 30 days when a user no longer needs access to FATS.

Printed Name _____ Phone _____

Email _____

Signature _____ Date _____

DPB Security Officer:

Signature _____ Date _____

Please forward to: Agency Security Officer
Department of Planning and Budget
1111 East Broad Street, Room 5040
Richmond, VA 23219

Or FAX to:
804-225-3291