

# APPLICATION FOR EXTRANET TRANSACTION ACCESS

**PURPOSE:** This application must be used when applying for or renewing an existing Memorandum of Understanding and Agreement (MOA) with the Department of Motor Vehicles (DMV). An MOA is needed when obtaining driver, vehicle and/or personal information from DMV's record database or providing information to DMV's record database via the Internet (extranet).

## INSTRUCTIONS:

1. Complete in ink or type. If you downloaded this application from DMV's website you may complete it online. However, you must print the form and sign it.
2. Complete all applicable parts of the application. Be as specific as possible. If additional space is needed, attach additional pages. Write N/A beside any part(s) or question(s) that do not apply.
3. Have an authorized agent or representative of the applicant sign and date the application. Unsigned or incomplete applications cannot be processed and will be returned to the applicant.
4. If also completing an Information Use Application, form US 531A/AR, with this application, only one \$25 application fee is required. Non-profit and charitable entities specified in Virginia Code §46.2-208, unless exempt from fees based on this code section, are subject to an application fee of one-half the normal fee or \$12.50.
5. Mail the completed application and the appropriate application fee to the address below.

Use Agreement Services  
Virginia Department of Motor Vehicles  
Post Office Box 27412  
Richmond, Virginia 23269-0001

## SPECIAL APPLICATION NOTES AND PROVISIONS

- ▶ This application is subject to change based on changes in state or federal laws, rules, and regulations governing access and use of the requested information.
- ▶ By submitting this application, the applicant agrees to comply with all rules, laws, and regulations governing access to DMV records and the information they contain, including the Virginia Code §§ 18.2-152.1 through 18.2-152.14 and the federal Fair Credit Reporting Act, Public Law 91-508.
- ▶ Violation of the state laws concerning use of DMV information and files is punishable under state law as a Class 4 misdemeanor. Violations of federal Fair Credit Reporting Act, Public Law 91-508 and the provisions therein are punishable by a fine up to \$5,000 or two years imprisonment or both.
- ▶ When approved, users are subject to reasonable inspection and/or audit by DMV to ensure compliance with the terms and provisions stated in the Memorandum of Understanding and Agreement.
- ▶ Applications with false, misleading, or otherwise deceptive information will not be processed and may be grounds for criminal prosecution under state and federal law.

The following are standard requirements of a DMV Extranet Memorandum of Understanding and Agreement:

- ▶ All extranet users shall, at their own expense, comply with and maintain compliance with all Commonwealth of Virginia IT security policies, standards, and guidelines, including and revisions, amendments, and/or successors thereto. All extranet users shall make all necessary modifications to comply with and maintain compliance with all revisions, updates, modifications, and/or successors to such policies, standards, and guidelines at its own costs. All extranet users also shall, at their own expense, comply with and maintain compliance with the DMV IT Architecture and Security Documents, as may be amended from time to time.
  - Copies of the current Commonwealth of Virginia IT security policies, standards, and guidelines are available on the VITA Website at [http://www.vita.virginia.gov/library/default.aspx?id=537#security\\_docs.asp](http://www.vita.virginia.gov/library/default.aspx?id=537#security_docs.asp).
  - Copies of the most recent DMV IT Architecture and Security Documents are available on the DMV Website at [http://www.dmv.virginia.gov/webdoc/general/security\\_docs.asp](http://www.dmv.virginia.gov/webdoc/general/security_docs.asp).
- All extranet users will be responsible for reviewing these websites for revisions, updates and/or modifications at least once every six months.
- ▶ Antivirus Requirements: Extranet User understands and agrees that each and every electronic device used to access data stored on DMV Systems must have commercially available Antivirus software installed and actively running on the device, and that the Antivirus software must be maintained with up to date virus definitions.
- ▶ Audit Requirements: DMV reserves the right to audit User to confirm compliance with all requirements in the DMV Memorandum of Understanding and Agreement. User shall provide DMV with full access to and the opportunity to examine any records, electronic devices, and/or other materials necessary to perform such audits.

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The information below is required by the State Comptroller for debt set-off collection purposes in accordance with the of Virginia Code §§ 2.2-803 and 2.2-4800, et al. Print or type

<b>PART 1: USER INFORMATION (All applicants must complete this part.)</b>			
CURRENT DATE (mm/dd/yyyy)	BUSINESS NAME		
TYPE OF APPLICATION (check the appropriate box) <input type="checkbox"/> NEW APPLICANT <input type="checkbox"/> RENEWAL		CURRENT DMV USE AGREEMENT NUMBER	
TYPE OF BUSINESS			
FEDERAL ID NUMBER OR SOCIAL SECURITY NUMBER		DEALER CERTIFICATE NUMBER(S) (required for dealers only)	
STREET ADDRESS	CITY	STATE	ZIP CODE
POST OFFICE BOX	CITY	STATE	ZIP CODE
TELEPHONE NUMBER	FAX NUMBER	BUSINESS EMAIL ADDRESS	

<b>PART 2: TYPE OF TRANSACTIONS TO PROCESS (All applicants must complete this part.)</b>
<p>Check the appropriate block to indicate the type of DMV transactions you wish to conduct.</p> <p><input type="checkbox"/> Process Financial Responsibility Insurance Certification Filings (complete Part 3 below) (No Application Fee Required)</p> <p><input type="checkbox"/> Process Clinic Roster Submissions (Application Fee Required)</p> <p><input type="checkbox"/> Process Independent Dealer Operator Course qualification records (No Application Fee Required)</p> <p><input type="checkbox"/> Request Mechanic and Storage Lien Transcripts</p> <p><input type="checkbox"/> Request Customer Information Transcripts (Voter Registrar's Only)</p> <p><input type="checkbox"/> Request Compliance Summary Letter</p> <p><input type="checkbox"/> Request Driver Transcripts</p> <p><input type="checkbox"/> Request Driver Alert Electronic Notifications</p> <p><input type="checkbox"/> Request Vehicle Transcripts</p> <p><input type="checkbox"/> Renew Dealer Certificate, Salesperson License, Dealer License Plates (No Application Fee Required)</p> <p><input type="checkbox"/> Temporary Tag Inventory Maintenance (No Application Fee Required)</p> <p><input type="checkbox"/> Review lessee information and update the lessee database with lessee information on a new lease, termination of lease, or a change of address to include a change of garage jurisdiction</p> <p><input type="checkbox"/> Submit CDL 3rd Party Tester Road Skills Test Results (No Application Fee Required)</p> <p><input type="checkbox"/> Submit Driver Training School Completion Information (Application Fee Required)</p> <p><input type="checkbox"/> Submit Escort Vehicle Driver Training Results (No Application Fee Required)</p> <p><input type="checkbox"/> Submit Escort Vehicle Driver Training Results - Remote Tester (No Application Fee Required)</p> <p><input type="checkbox"/> Submit Escort Vehicle Remote Tester Invoice Payments. (No application fee required)</p> <p><input type="checkbox"/> Submit Insurance Acknowledgment (complete Part 3) (No Application Fee Required)</p> <p><input type="checkbox"/> Submit Insurance Filings for Motor Carriers (complete Part 3 below) (No Application Fee Required)</p> <p><input type="checkbox"/> Process Conviction Reports (courts only)</p> <p><input type="checkbox"/> Process Local Vehicle Registration (LVR). Are you under contract with another jurisdiction to administer local vehicle registrations? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, list all applicable jurisdictions.</p> <hr/> <p><input type="checkbox"/> Vehicle Disposition Reporting (Scrap Metal applicants) -- if multiple locations exists, please attach a list of all location names and addresses (No Application Fee Required)</p> <p><input type="checkbox"/> Vehicle Disposition Reporting (Demolisher/Salvage Dealer applicants) -- please list all certificate numbers in Part 1 (No Application Fee Required)</p>

<b>PART 3: INSURANCE COMPANY INFORMATION (Insurance companies only)</b>	
<p>Insurance companies must complete this part when requesting to process Financial Responsibility Insurance Certification Filings, Insurance Filings for Motor Carriers, and Insurance Acknowledgements.</p> <p>Provide the name(s) of all insurance company(ies), their insurance code(s) or the NAIC for which you will be filing. (Insurance codes are for SR22/26, FR44/46 and Insurance Acknowledgement filers only.)</p>	
<b>Name of Insurance Company</b>	<b>Insurance/NAIC Code</b>

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## PART 4: USER INFORMATION (All applicants must complete this part.)

Provide the names of all employees who will be authorized to use the requested access. An RSA SecurID token (required for access) will be assigned to each employee at a fee of \$65.00 each. Please remit payment along with this application.

User Name (first, middle initial, last)	Mother's Maiden Name	Business Email Address

**EXISTING USERS:** All employees who currently have an assigned RSA SecurID token should complete the information below.

User Name (first, middle initial, last)	Mother's Maiden Name	Business Email Address	Current Log On ID	RSA SecurID Token Serial Number

## PART 5: SECURITY INFORMATION (All applicants must complete this part.)

All organizations with extranet transaction access must designate a security officer who is responsible for administering user logon IDs. Provide the following information for your designated security officer.

TELEPHONE NUMBER	FAX NUMBER	BUSINESS EMAIL ADDRESS
SECURITY OFFICER NAME		SECURITY OFFICER SIGNATURE

## PART 6: CERTIFICATION (All applicants must complete this part.)

I, the undersigned, certify and affirm that: 1) I am a duly authorized agent of the applicant; 2) I am authorized to make application to DMV for any information use agreement for the purpose stated in this application; and 3) all information presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.

USER/BUSINESS NAME (print or type)	CURRENT DATE (mm/dd/yyyy)	
AUTHORIZED REPRESENTATIVE NAME (print or type)	TITLE (print or type)	
AUTHORIZED REPRESENTATIVE ADDRESS (if different from Part 1)		
CITY	STATE	ZIP CODE
SIGNATURE		
TELEPHONE NUMBER	FAX NUMBER	BUSINESS EMAIL ADDRESS

## DMV USE ONLY

APPLICATION <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	SIGNATURE
IF APPROVED, LIST DATE (mm/dd/yyyy) (USE AGREEMENT MAILED)	TITLE
IF DENIED, GIVE REASON(S)	DATE (mm/dd/yyyy)