



# Houston Police Department Network Access Form

Submit Form To:  
**CJIS Compliance Unit**  
**CCU@houstonpolice.org**  
**Desk#: 713.308.9018**

## External Non-HPD

This form is used for **personnel NOT employed by the Houston Police Department** and who are requesting technical sign-on capabilities to any HPD logical system. **NOTE:** Review the accompanied Access Definition Information Sheet for instructions.

<input type="checkbox"/> <b>External Agency</b>	Agency Name:	ORI#:	Date(mm/dd/yyyy)
<input type="checkbox"/> <b>Contractor</b>	Company Name:		
<b>Request Type</b> (Mark All Which Apply)	<input type="checkbox"/> New Addition	<input type="checkbox"/> Deletion	<input type="checkbox"/> Change of Information
	<input type="checkbox"/> Access Changes	<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Name <input type="checkbox"/> Address <input type="checkbox"/> Phone <input type="checkbox"/> Agency <input type="checkbox"/> Unit <input type="checkbox"/> Email

### Applicant Information Existing/Prior Temp Payroll #:

L-Name:		F-Name:		MI:
Applicant Email:			Rank/Title:	
DOB:	Race/Sex:	DL/ID:	SSN	TXDPS User ID:
Work Address:	City:	State:	Zip:	Office Phone:
Agency TAC / Contact Name:			Office Phone:	
TAC / Contact Email:				

<b>Requested Access:</b> <i>Specified in Agreement</i>	<input type="checkbox"/> HPD Network	<input type="checkbox"/> OLO (Inquiry Only)	<input type="checkbox"/> General Persons Inquiry
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Other (Specific):

<p>Upon signing this Access Request form you acknowledge the specific agreement (MOU, MCA, or Security Addendum) signed by your agency/company, in addition to the <b>HPD Network Remote Access Agreement</b>.</p>	<b>HPD Division Responsible for Applicant</b>
	Division/Project:
_____	_____
Applicant's Signature	Signature HPD Supervisor / PR#

### DO NOT WRITE BELOW THIS LINE - HPD USE ONLY

<b>CJIS Compliance Unit</b>	CJISID:	Date Sent to ESD:	TAC:
MOU <input type="checkbox"/> MCA <input type="checkbox"/> Volunteer <input type="checkbox"/> SecAdd <input type="checkbox"/>	Routing ORI # _____		

<b>Employee Services Division</b>	CCD #
Entered By: _____	Date Assigned: _____
Assigned Payroll # _____	

<b>Gang Division</b> (If Applicable)	Date: _____	Staff Review: _____	<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved
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<b>Technology Services</b>	Date Access(s) Provided: _____	Date Notified: _____
Processed By: _____	ITSM Tracking # _____	



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<input type="checkbox"/> External Agency	Agency Name:	ORI#:	Date(mm/dd/yyyy)
<input type="checkbox"/> Contractor	Company Name:		
Request Type (Mark All Which Apply)	<input type="checkbox"/> New Addition	<input type="checkbox"/> Deletion	<input type="checkbox"/> Change of Information
	<input type="checkbox"/> Access Changes	<input type="checkbox"/> Reinstatement	<input type="checkbox"/> Name <input type="checkbox"/> Address <input type="checkbox"/> Phone <input type="checkbox"/> Agency <input type="checkbox"/> Unit <input type="checkbox"/> Email

### Check only one box

- If you check External Agency provide an *Agency Name* and *ORI#*
- If you check Contractor you will provide the *Company name* you are working with.

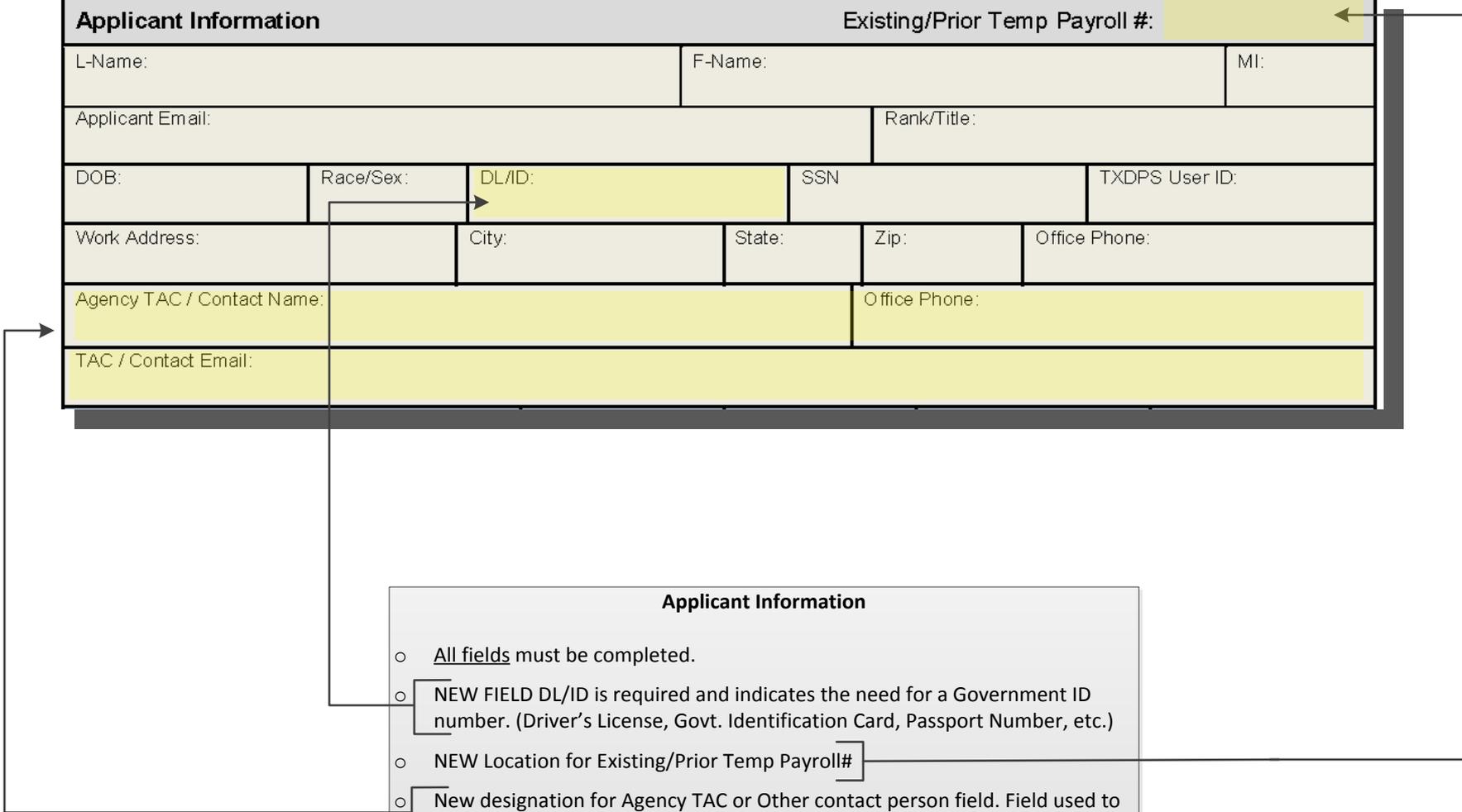
### Request Type

- Select one Request Type
- If you check *Change of Information*, select type of change.

Enter Date of Application

<b>Applicant Information</b>						Existing/Prior Temp Payroll #:		
L-Name:			F-Name:			MI:		
Applicant Email:					Rank/Title:			
DOB:		Race/Sex:	DL/ID:		SSN:		TXDPS User ID:	
Work Address:		City:		State:	Zip:	Office Phone:		
Agency TAC / Contact Name:					Office Phone:			
TAC / Contact Email:								

- Applicant Information**
- All fields must be completed.
  - NEW FIELD DL/ID is required and indicates the need for a Government ID number. (Driver's License, Govt. Identification Card, Passport Number, etc.)
  - NEW Location for Existing/Prior Temp Payroll#
  - New designation for Agency TAC or Other contact person field. Field used to contact a person during normal business hours, status of request.



**HPD Sign-On** - provides access to log into an HPD computer or have access through a remote connection. Must be checked for all connection(s).

**OLO** - Access to the HPD On-Line Offense System (OLO) for inquiry. This is *DEFAULT ACCESS* that will not allow modification or entry of data. If you request OLO entry you must specify it in the "Other Section."

**Local Records** - Access to the HPD local records for: jail, warrants, local arrest history, and local offense report history.

<b>Requested Access:</b> <i>Specified in Agreement</i>		<input type="checkbox"/> HPD Network	<input type="checkbox"/> OLO (Inquiry Only)	<input type="checkbox"/> General Persons Inquiry
<input type="checkbox"/> Other (Specific):				
<p>Upon signing this Access Request form you acknowledge the specific agreement (MOU, MCA, or Security Addendum) signed by your agency/company, in addition to the <i>HPD Network Remote Access Agreement</i>.</p>			<b>HPD Division Responsible for Applicant</b>	
			Division/Project:	
<p>_____</p> <p style="text-align: center;">Applicant's Signature</p>			<p>_____</p> <p style="text-align: center;">Signature HPD Supervisor / PR#</p>	

All requests must be covered by a previously signed agreement, (MOU, MCA, or Security Addendum) in addition to this form. Access requests are reviewed and granted as it is indicated within the signed agreement. If the access you are requesting is not in the agreement, it will not be granted here. Access availability questions can be answered by the CJIS Compliance Unit at (713) 308-9018, or [CCU@houstonpolice.org](mailto:CCU@houstonpolice.org).

Make a selection for the requested logical access to the HPD systems. If the access you're requesting is not listed, check the "Other" selection and state your request.

The checkboxes listed are the basic access external agencies should received from HPD. Your agency should already have their own TLETS connection and there is no need to connect to HPD for this association. If however, you are requesting any TLETS function, (DL, Plates, or CCH) then select "Other" and indicate the TLETS function requested.

Additional databases that may need to be accessed and not included above, (i.e. Gang Tracker) must be approved by the hosting division first before access will be granted. Select "Other" and indicate the specific database requested.

Volunteers, Contractors, and other individuals working for a specific HPD Division or Project will need to complete the section "HPD Division Responsible for Applicant". Signature and Payroll number of HPD Supervisor is required.

Finally, this request form must be signed by the individual requesting access under the section "Applicant's Signature."

**DO NOT WRITE BELOW THIS LINE - HPD USE ONLY**

**CJIS Compliance Unit**    CJISID: \_\_\_\_\_    Date Sent to ESD: \_\_\_\_\_    TAC: \_\_\_\_\_  
MOU  MCA  Volunteer  SecAdd     Routing ORI # \_\_\_\_\_

**Employee Services Division**    CCD # \_\_\_\_\_  
Entered By: \_\_\_\_\_    Date Assigned: \_\_\_\_\_    Assigned Payroll # \_\_\_\_\_

**Gang Division (If Applicable)**  
Date: \_\_\_\_\_    Staff Review: \_\_\_\_\_     Approved     Disapproved

**Technology Services**    Date Access(s) Provided: \_\_\_\_\_    Date Notified: \_\_\_\_\_  
Processed By: \_\_\_\_\_    ITSM Tracking # \_\_\_\_\_

All fill fields within this section are completed by specific entities of the Houston Police Department. DO NOT make any marks or comments in this area.