

AUTHORIZATION

POLICY

The authorization list provided by the client enables Fireproof Records Center to provide the security specific to each customer for their offsite record storage. Each client will select a password. The password is required to activate the account. Clients will be required to use the password to request services. The Authorizing person for each account will designate the level of each person listed on the Authorization list. A picture ID will be required for all customer pick-ups at Fireproof and/or for accepting after-hours services. Information will not be released if authorized identification is not provided at the time of delivery/pick up. It is imperative that a current list be maintained at the client's location and at Fireproof. The authorization list should be reviewed annually or whenever there is a change in personnel. It is the client's responsibility to inform Fireproof, in writing, of any changes in their authorized personnel or password.

PROCEDURES

All clients of Fireproof will provide an authorization list and password. The password is required to activate the account prior to any inventory being retrieved. Clients will provide a list of persons who are authorized to have access to inventory stored at Fireproof. Persons authorized will have a level of activity assigned to them. Those levels are:

- 1 M-F, 8:00 am – 5:00 pm Telephone, Fax, Email & **regularly scheduled** weekend service
- 2 After Hours/Weekends & Holidays
- 3 Declare a Disaster
- 4 Send/Receive Tapes/Files/Boxes
- 5 Web Access
- 6 Pick Up inventory at Fireproof
- 7 RUSH Service/Delivery
- 8 Full Administrative Authority (Authorizing Person)

If an independent courier service is used, the courier company name should be on the Authorization List. It will also be required for the courier to provide Courier ID and written documentation of the client's documents to be picked up.

Whenever there is a change in the client's designated Authorizing Person, an Officer of the company will notify Fireproof in writing. This notification should include the name of the new Authorizing Person and their title. Updates to the password are also required to be submitted to Fireproof in writing by the Authorizing Person. Examples of updates to the Authorization List and password could be a result of promotion, leave of absence, termination of employment, vacation or the addition of a new employee.

When a client needs to send an unauthorized person to Fireproof to either pick up or review information, a letter of temporary authorization should either be mailed or faxed to Fireproof prior to the person's arrival. The letter **MUST** be person, date and activity specific. The temporary authorization must be on the client's letterhead and be signed by the authorizing person. The temporarily authorized person must also present a picture ID upon arrival at Fireproof.



FIREPROOF RECORDS CENTER

Safe. Secure. And there when you need it.

___ This list superseded all others

___ This list is in addition to the current list

P.O. Box 1150
Grove City, OH 43123

Phone: 614/299-2121
Fax: 614/299-7943
Email: service@fireproof.com

Authorization Form - Hardcopy & Media

Company Name _____

Account No. _____

Delivery Address _____

Password _____

Additional Delivery Addresses: 2. _____

3. _____

A password is required for telephone requests. Only individuals listed below are authorized to access information stored at Fireproof Records Center. Access includes web, telephone, fax and email communication and receipt of information at the Customer's site. Each individual will be assigned specific levels of access. Unless otherwise specified at the time of the request, deliveries will be made only to the requestor. _____ (Customer Approval)

Department: _____

Authorization Levels

- 1** M-F 8:00 am – 5:00 pm Access & Regularly Scheduled Weekend Service
- 2** After Hours/Weekends & Holidays
- 3** Declare a Disaster
- 4** Send/Receive Media/files/boxes
- 5** Web Access
- 6** Customer Pick Up at FRC
- 7** RUSH Service/Delivery
- 8** Full Admin. Authority

NAME (Please Print)	SIGNATURE	DEPARTMENT	LEVEL							
			1	2	3	4	5	6	7	8
_____	_____	_____								
_____	_____	_____								
_____	_____	_____								
_____	_____	_____								
_____	_____	_____								

I, _____, representative for Company, authorize the individuals listed above to have access to Company's records according to their designated authorization level. It is the Customer's responsibility to inform Fireproof of all personnel changes affecting the Authorization list. When the Authorizing Person has Web Administrative rights, that person will be responsible for any and all authorization updates.

Authorizing Person's SignatureDate

