

### The Contractor/Grantee Must Complete This Section

Check one:  New Token     Replacement Token    Replacement Reason\*     Lost/stolen     Expired     Broken/destroyed

\*Required if Replacement Token selected. Note: replaced tokens will require you to set up a new PIN. If you are unsure how to do that, see the instructions at <http://humanservices.vermont.gov/departments/information-technology/rsa-securid/>

Contractor/Grantee Name:  Contract/Grant End Date:

Name of employee who will use token:

Employee's phone:

Location of Employee:

The person named above requires access to the AHS account for the following purposes:

**The user agrees that any computer used to access AHS systems has up-to-date virus protection and fire wall software.**

Date:

Signature of employee who will use token

### For State Use Only

Name of State Contract Manager:

Phone number:  Department:  Division:

Location:

Date:

Signature of State Contract Manager

Date:

Signature of Department IT Manager

### For Administrative Use Only

RSA Token Number:

Username:

Signature of  
AHS Administrator

Date: