



STATE OF CONNECTICUT
DEPARTMENT OF EMERGENCY SERVICES & PUBLIC PROTECTION
DIVISION OF EMERGENCY MANAGEMENT & HOMELAND SECURITY



WEBEOC USER ACCOUNT AND POSITION ACCESS FORM

ACCOUNT ACTIONS <small>Check all that apply. Provide any additional information, as requested, below each check box.</small>		
ADD NEW USER ACCOUNT OR ADD ACCESS TO WEBEOC POSITION*	UPDATE EXISTING USER CONTACT DETAILS	DISABLE USER ACCOUNT / WEBEOC POSITION ACCESS*
	<i>Prior Name, if applicable:</i>	<i>Reason:</i> <i>Effective Date:</i>
<small>* WebEOC Position is a system term that the User is assigned. WebEOC Position relates to functional duties in emergency management in support of the State Emergency Operations Center. This is NOT the individual's professional title. The WebEOC Position may or may not reflect the agency name.</small>		
USER ACCOUNT DETAILS <small>All fields are required to be completed.</small>		
Email Address		
Full Name		
First Name		
Last Name		
Office Phone		
Mobile Phone		
Department (Unit, i.e. Fire Department) Name		
Organization (Agency, i.e. Town of X) Name		
AUTHORIZED REPRESENTATIVE'S DIGITAL SIGNATURE AND INFORMATION		<i>Digital Signature</i>
<i>Date (MM/DD/YY)</i>	<i>Name</i>	<i>Title</i>
		<i>Sponsoring Entity</i>

FORM INSTRUCTIONS

- **The information contained on the State of Connecticut's WebEOC system is solely for use by emergency management and first responder professionals, and other authorized users. For more information, navigate to ct.gov/demhs/webeoc.**
- **Complete the form in entirety according to the guidance provided.** Incomplete forms will be returned.
 - DO NOT USE THIS FORM for healthcare related Users/Positions (DPH partners).
Instead, navigate to: <https://portal.ct.gov/DPH/Public-Health-Preparedness/Main-Page/WebEOC>.
 - All other partners use this form to ADD, EDIT/MODIFY, or DISABLE a WebEOC User Account or access to a Position.
- **Save the form locally before entering data.** Do NOT complete the form directly from within a browser window/tab.
- **Complete ONE form per User account.** Accounts are created unique to each individual and associated email address. No generic named or shared accounts are allowed, and no repeat use of email addresses is permitted across the system. PROFESSIONAL contact information must be provided and should reflect the sponsoring entity. Please do not use acronyms when completing this form. A 24-hour number, such as a mobile or dispatch number is encouraged for after-hours emergencies.
- **All entries must be digitally entered.** Handwritten and scanned forms will NOT be accepted.
- **The Authorized Representative for the sponsoring entity must (digitally) sign and submit a form on behalf of a User.** An Authorized Representative is the agency head with responsibility for emergency management:
 - Municipality or Tribal Nation – *Chief Executive Officer (CEO) or Emergency Management Director (EMD)*
 - Public Safety Answering Points (dispatch centers) – *Executive Director or Manager*
 - State Agency or Commission – *Commissioner or Executive Director*
 - Other Partners – *leading agent with authority for emergency management*
 - *Accounts may also be added, updated, or removed based on the advisement of a WebEOC Administrator, DEMHS Regional Coordinator, the DEMHS Emergency Management Director, or acting SEOC MAC Commander, SEOC Operations Chief, SEOC Operations Officer.*
- **Attach the form to an email and submit to demhs.webeoc@ct.gov.** Submittals MUST originate from a professional email of the Authorized Representative. Again, only the Authorized Representative should submit the form, but the User may be carbon copied. Multiple forms MAY be submitted in a single email transmission. Do NOT email forms direct to individual WebEOC Administrators.
- **A DEMHS WebEOC Administrator will review the form for vetting and, as necessary, additional information may be requested.**

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An Affirmative Action/Equal Employment Opportunity Employer