March 2021

NOAA C.SUITE ACCESS FORM

All requesters must be entered in the NOAA or DOC Staff Directory prior to obtaining access to NOAA Acquisition Systems . Submissions and updates to the NOAA Staff Directory can be sent to noaa.staff.directory@noaa.gov.

Date of Request:

Requester Name:
Email Address:
Office Phone:
Role:
Are you a Supervisor? **Y** ◯ **N** ◯
If Yes, please attach a list of those you will be supervising.

Are you a COR? **Y** ◯ **N** ◯

New Account: **Y** ◯ **N** ◯ Deactivated Account: **Y** ◯ **N** ◯
If Deactivated Account, Login ID:
Employee Type:
Title:
Office Fax:
Line Office:
Are you a Field Delegate/FD in training? **Y** ◯ **N** ◯
Field Delegate Line Office:

Do you certify funds? **Y** ◯ **N** ◯

MANDATORY FOR ALL REQUESTERS - SECURITY AWARENESS COURSE (Signature Required/ Must Acknowledge)

I acknowledge that I have completed the mandatory NOAA Cybersecurity Awareness & Privacy Training Course.

Requester signature: Date:

REQUISITIONER ONLY (Signature Required/ Must Acknowledge)

I acknowledge that when I create a requisition I am required to share that requisition with a BFNC for a particular purchase.

Requester signature: Date:

BONA FIDE NEED CERTIFIER (BFNC) ONLY (Signature Required/ Must Acknowledge)

I acknowledge that I am authorized to certify the bona fide need for a particular purchase.

Requester signature: Date:

FUND CERTIFYING OFFICIAL (FCO) ONLY (Signature Required/ Must Acknowledge, CFO signature required on page 2)

I acknowledge that I am authorized to certify the availability of funds and the suitability of their use for a particular purchase.

Requester signature: Date:

AGO STAFF ONLY

AGO OFFICE:

CONTRACTING OFFICER (INCLUDING FIELD DELEGATE) ONLY

Select Warrant Level: **Must submit copy of warrant with request*

NOAA C.SUITE ACCESS FORM

APPROVALS

FOR ALL REQUESTERS/APPLICANTS

The supervisor's signature below certifies that the requester is authorized to access NOAA Acquisition Systems.

Supervisor Name: Office Phone:

Supervisor Signature: Date:

FUND CERTIFYING OFFICIAL (FCO) ONLY

The Line Office Chief Financial Officer's (CFO) signature below certifies that the requester is authorized to access NOAA Acquisition Systems and is authorized to certify the availability of funds. The NOAA CFO needs to sign for any Staff Office.

CFO Name: Office Phone:

CFO Signature: Date:

DOCUMENT APPROVER ONLY (No other roles will be granted)

The supervisor's signature below certifies that the requester is authorized to access NOAA Acquisition Systems and is able to review and approve a requisition.

Supervisor Name: Office Phone:

Supervisor Signature: Date:

AGO STAFF ONLY

HCO/Deputy Director/Branch Chief Name: Office Phone:

HCO/Deputy Director/Branch Chief Signature: Date:

FIELD DELEGATE or FIELD DELEGATE IN TRAINING ONLY

Field Delegate Coordinator Name: Office Phone:

Field Delegate Coordinator Signature: Date:

Submit signed requests with a copy of Security Awareness Course Certificate (and a copy of Warrant if applicable) to the Client Services CBS Help Desk via email to clientservices@noaa.gov. If you have any questions, email the Client Services CBS Help Desk at clientservices@noaa.gov or call 301-444-3400 – Option 3.

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