



**RI Dept of Corrections
Special Investigations Unit
Web Enabled INFACTS (WINFACTS)
User Agreement**



Completed applications must be submitted to
doc.inspector@doc.ri.gov

Law Enforcement Organization _____

Last Name, First, Middle _____

Department Address _____

Cell Phone Number _____ Office Number _____

E-Mail Address _____

Supervisor's Name _____ Signature _____

Phone Number _____ E-Mail Address _____

*****DISCLOSURE*****

This agreement shall commence for the user on the date signed and continue until the Department of Corrections or the user terminates service. The user may, upon thirty (30) days, send a written notice stating the reasons for termination and the effective date, cancel this agreement.

The user will receive a unique user ID and password to log onto the system from the MIS Unit at the Department of Corrections once this agreement is filled out. The user ID is for the exclusive use of the assigned user and shall not be give to or used by anyone else. If the user leaves employment, it is the responsibility of the department supervisor to immediately inform the MIS Unit at 401-462-3910.

The Department of Corrections reserves the right to immediately suspend furnishing any information or services provided for in this agreement to the user, if information is violated or appears to be violated by the user.

The purpose of this agreement is to set forth, in writing, the terms and conditions under which the Department of Corrections will provide access to the web-enabled INFACTS (WINFACTS) as requested.

System access granted by this agreement is non-transferable by the above-named user and if violated will be revoked by the Department of Corrections.

The user will access, use and disseminate information, only when relevant and necessary for criminal justice purposes. Systems shall not be used for personal or non-governmental reasons. The Department of Corrections will conduct regular and systematic audits of the system to alleviate the possibility of improper access, use and dissemination of information.

Department of Corrections will provide telephone support to the departments, by them calling the MIS 401-462-3910 from 8:00 AM to 4:00 PM. If a user needs to reset their password, they can call MIS at the number listed above.

Signature _____ Date _____

Printed Name _____

SIU OFFICE USE	
Date Received _____	Received by _____
Date Access Initiated _____	Access Expiration Date _____