

Access to AIM is granted only to FM Approvals customers, partners and their representatives.

SUPER USERS ONLY: Fill in this section ONLY if you are requesting access for someone other than yourself.

Your Email Address: _____

Your Full Name: _____

USER INFORMATION

User Role: _____

User First Name: _____

User Last Name: _____

User Middle Initial: _____

User Email Address: _____

User Title: _____

COMPANY INFORMATION

Company Name: _____

Parent Company (if applicable): _____

Marketing/Trade Name: _____

Mailing Address 1: _____

Mailing Address 2: _____

City: _____

State or Province: _____

Country: _____

Postal Code: _____

Customer ID Number(s):

Please note: if your company has multiple customer identification numbers, your request may require further review by/verification from other personnel within your organization.

COMPANY INFORMATION contd.

Project IDs:

Do you have the authority to view all projects associated with the customer ID listed above?

Yes No

If Yes, would you like to authorize future requests for AIM access for your organization?

Yes No

If No, provide information for the individual of authority in your organization that we may contact.

First Name: _____

Last Name: _____

Middle Initial: _____

Email Address: _____

Title: _____

I understand that this Customer ID could be associated with projects that other contacts within my organization also have access to.

If you are not an active contact in our system, your request may require further review by/verification from other personnel within your organization.

This form may also be saved and emailed directly to: aimhelp@fmapprovals.com.