

Department of Administration	Facility Management Division Standard Operating Procedure SOP			
Access Card Request (ACR) (ACR-VR) Instructions for Building Coordinators to complete and submit ACR forms to Security Systems.	NUMBER 2	REV 3	EFFECTIVE DATE 06/01/2021	PAGE 1 OF 11
	SUPERSEDES All Prior to 03/31/2021	PREPARED BY Gregg Collins		REVIEWED BY APPROVED BY

1.0 **PURPOSE:**

This procedure provides the NC Department of Administration, and Security Systems a consistent and uniform process to receive (ACR) Forms from approved Building Coordinators.

2.0 **HISTORY OF REVISIONS:**

Date	Revision	Change	Reference Section
04/26/2021	2	All	Page 1 - 9
08/14/2024	3	Voter ID preference added	Page 5, 10 & 11

3.0 **PROGRAMS AFFECTED:**

- 3.1 Facility Management Division/Security Systems
- 3.2 All State Agencies, Building Coordinators, Permanent, Temporary, and Contract Employees requiring a Card Access Badge or ID Badge created through the DOA Facility Management/Security Systems office.

4.0 **REFERENCES:**

- 4.1 All North Carolina Department of Administration OSHR Badge ID policies.
- 4.2 **BCF** (Building Coordinator Request Form)
- 4.3 **KCRF** (Key and Core Request Form)
- 4.4 **DOA** (Inclement Weather Policy) – [Inclement Weather Policy](#)

5.0 **POLICY:**

- 5.1 The Facility Management Division/ Security Systems, Department of Administration will use consistent and uniform forms and processes for accepting Access Card Requests (**ACR's or ACR-VR's**).
- 5.2 All Agencies, Departments, and Building Coordinators will use the approved (**ACR or (ACR-VR)** Form (.pdf 08/14/2024) and send through the (**ReaDY Badging Access Application**)

6.0 **DEFINITION:**

- 6.1 **ACR** (Access Card Request) **or ACR-VR** (Access Card Request w/Voter Request option) This form is used for replacement, lost, damaged, agency or department change, employment change, and/or name change.
- 6.2 **ACR-VRSF** (ACR Voter Request Supplemental Form) This form is for instructing and verifying that the employee understands the voter statutes that they must follow when using the new voter approved ID.
- 6.3 **Building Coordinator** – Selected individual(s) assigned and approved from an agency and or Division to send in Key Request Forms, Access Card Request Forms, changes to access levels up to and including deactivations of an individual's access card.
- 6.4 **BCF** (Building Coordinator Form)
- 6.5 **DOA** (Department of Administration)
- 6.6 **FMD** (Facility Management Division)
- 6.7 **New Hire** (to include, Permanent, Temporary, Contractor, Intern Employee and Board and/or Commission members).
- 6.8 **Security Systems** - Card Access will be processed through the (**ReaDY Badging Access Application**) for all security related correspondence. **Do not attempt to send requests through a conventional work order.** This includes Access Card Requests (**ACR's**), changes in access, activations and deactivations, reports, inclement weather, and emergency lockdowns and unlocks of buildings.

7.0 **RESPONSIBILITY:**

- 7.1 **DOA FMD Badging Office Manager** is responsible for the following:
 - 7.1.1 Ensure all Building Coordinator lists are up to date.
 - 7.1.2 Provide a Building Coordinator the direction to the **(ReaDY Badging Access Application)** portal to submit a BCF form.
 - 7.1.3 Educate and assist all new Building Coordinators. This includes providing a copy of **Standard Operating Procedures** regarding **(ACR)**, the **(ACR)** and **(ACR-VR)** Form, and any information pertinent to their specific agency/department regarding access.
 - 7.1.4 Review and ensure all **(ACR's)** received **(ReaDY Application)** requests are from approved Building Coordinators are correct.
 - 7.1.5 Inclement Weather / Emergency Building lockdowns and unlocks.
- 7.2 **DOA FMD Security Systems Office** is responsible for the following:

Receiving all Card Access Requests from the **(ReaDY Badging Access Application)** portal regarding changes to access.

 - 7.2.1 **Card Access Badges.**
 - 7.2.2.A - Scheduling Appointments.
 - 7.2.2.B - Print badges with Photos from Remote Sites.
 - 7.2.2.C - Print badges and badge replacements if:
 - 1.) **Broken**
 - 2.) **Lost**
 - 3.) **Stopped Working**
 - 4.) **Return to Work**
 - 5.) **New Hire**
 - 6.) **Agency / Department change**
 - 7.) **Name Change**
 - 7.2.2 Make access level changes that are requested via the **(ReaDY Badging Access Application)** from an approved Building Coordinator.
- 7.3 **DOA Building Coordinators** are responsible for the following:
 - 7.3.1 Generating **(ACR)** and **(ACR-VR)** forms.
 - 7.3.2 Submitting Forms to Security Systems need to be processed through the **(ReaDY Badging Access Application)**.
 - a.) Building Coordinators **must** monitor their ReaDY App for:
 - 1. **rejections**
 - 2. **inquiries**
 - 3. **completions**
 - 4. **deletions**of badges and/or information.
 - b.) Building Coordinators **must** respond to:
 - 1. **Date changes - informational**
 - 2. **Time changes - informational**
 - 3. **Wrong phone numbers – get an alternate**
 - 4. **No voice mail available – advise as to how to pass on information, etc.**
 - c.) All rejected forms must be resubmitted on a new ReaDY request.

- 7.3.3 Forwarding emails and/or notifying employees when badges are ready for pick-up.
- 7.3.4 **Informing Employees** of their fiscal responsibility when they need to pay for a badge, lanyard, etc.

8.0 **PROCEDURE:**

8.1 The approved **Building Coordinator** will accurately fill out the **(ACR)** or **(ACR-VR) Form**. The form must be **electronically filled out** and sent as a **“saved pdf document”**. This must be in the appropriate Acrobat Format. Handwritten, scanned or any other type of document (Word, Excel, etc.) will not be accepted. ***Any type of alteration*** to the form will not be accepted. If the form is altered or is not submitted by an approved Building Coordinator it will be sent back and can lead to subsequent delays.

8.2 **Filling out the (ACR) or ACR-VR Form**

- **The following block areas are required to be filled out. If not, the form will be sent back requesting the information to be completed.**

8.2.1 **Agency Information: (Line Item 1)** Each block of information must be completed. It is recommended to ***prefill this area*** and save it with exception of the request date. This block has a drop-down menu that can be filled on the actual request date. ***Save this as your pdf template.***

8.2.2 **Payment Option: (Line Item 2)** Only one of the two boxes can be selected. If **“send invoice to agency”** is selected, the company and center number **must** be provided. If **“payment by employee”**, check that box and **ensure** the employee is aware of their responsibility for payment and make the check payable to: **NCDOA (North Carolina Department of Administration).**

8.2.3 **Complete this portion for each person: (Line Item 3)** The information provided in this section is the most important aspect of the **(ACR)** or **(ACR-VR)**. Missing information may lead to the delay of scheduling and/or reprinting of a badge.

8.2.3.A The **“reason for request” must** be checked, in order for the request. Security Systems personnel to understand and proceed with The choices below are indicated as **check boxes** on the **(ACR)** forms.

- 1.) **Broken**
- 2.) **Lost**
- 3.) **Stopped Working**
- 4.) **Return to Work**
- 5.) **New Hire**
- 6.) **Agency Change**
- 7.) **Name Change**

8.2.3.B **ACR-VR form (Voter ID Preference):** If an employee indicates to the Building Coordinator that they want to have a **Voter ID preference** added to their badge, follow the steps below.

- **Next to “Reason for Request” is the “Add Voter ID Factor” check boxes**
 - *Select yes or no by clicking in the preferred box.*

- **Read supplemental form ACR-VRSF**

*Employee will need to electronically sign form to affirm their receipt of information and understand the **Voter ID statutes and requirements** when picking up their ID badge.*

- The only individuals permitted to get the **Voter ID** preferences are:
 - **Permanent State Employee**
 - **Temporary State Employee**
 - **State Commission Member**
- These select individuals must be registered to vote in North Carolina and be a North Carolina State Employee, Temporary Employee or NC Commission Member.
- **It is not incumbent for the State of North Carolina or its representatives to register their employees to vote.** That is the sole responsibility of the employee and the employee alone.
- **The Voter preference term of limits is 5 years from the inception and receipt of ID badge to the Employee, Temporary Employee or Commission member.**
 - **The Voter ID expiration date is printed on the back of the ID Badge** along with other ID badge specific rules that apply to NC State employees, temporary employees and commission members.
 - **If the expiration date is achieved** the ID badge will still allow employees access to their respective buildings; however, **they will need to request a new ID badge and new voter expiration date** if they intend to use it for voting purposes.
 - This feature is **not** available for **Contractor, Emergency Responder, Intern or Visitor ID Badges** supplied by the Department of Administration Badging Office.

8.2.3.C **(Badge Stopped Working):** If an employee indicates to the Building Coordinator that the badge has stopped working *please inquire:*

- **Has it been left in a vehicle?**
The cards are sensitive to hot and cold temperatures.
- **Is there any sign of a bend or crack?**
- **When was the last time it worked?**
- **How old is the badge?**
- **What door and what time and when/date did it occur?**

Asking these questions will help determine if a replacement is required or to get a service request to have a technician investigate if it is a programming or hardware issue.

8.2.3.D (**Name Change**): Put the new name in the boxes indicating First and Last Name. Under “*Additional Instructions*”, **please put in the former or maiden name**. This name is what is in the system and how we can cross reference the individual.

8.2.3.E (**Department**): (*example - Department of Administration*)

8.2.3.F (**Division**): (*example - Facility Management Division*)

8.2.3.G (**Identification required with current photo**)

- (Driver’s License number **Last (4) digits only**)
- (Passports, Federal or State ID number (**also Last (4) Digits**))

8.2.3.H (**Phone number with Area Code**): this can be the employees’ office or cell phone. A Supervisor’s or a Building Coordinator number is also acceptable if he/she is responsible for scheduling appointments.

8.2.3.I (**New Hire**): Please ensure that the hire date is entered under “**Employee Start Date**”, this is also a drop-down menu to view and check “**click the date**”.

8.2.3.J (**Access Levels**): One box must be checked. The days and times reflect the type of access, Regular Day, Extended Day or Unlimited 24/7.

8.2.3.K (**Access Card Expiration Date**): This area *must* be filled out for Temporary Employees, Contractors, and Interns.

8.2.3.L (**Employment status**): Hiring status of the employee, **box must be checked and be accurate**. This determines the color of the stripe of the badge. (*selections below*)

- 1.) **Permanent Employee - Red**
- 2.) **Temporary Employee – Sky Blue**
- 3.) **Board or Commission Member - Gold**
- 4.) **Contractor - Yellow**
- 5.) **Intern – Purple**

8.2.3.M **Access Needed**: This area is for all the access levels needed, be as specific as possible.

8.2.3.N **Additional Instructions**: The employee’s former name, ID purposes only, Field office location, alternate phone number for scheduling etc. Enter any additional information you may feel will help to expedite the process.

**The areas below “Additional Instructions” are for internal use and signatures only*
Do not attempt to fill any information out here.*

Signature will be obtained upon pick up of Access Card

8.3 **Processing the (ACR) or (ACR-VR):** Security Systems will determine the action to take for processing the (ACR) or (ACR-VR), new hires and any existing employees that request a new or replacement badge with a photo over five years old will be contacted for a formal photo shoot.

The Scheduling Admin will contact the employee and schedule an appointment which will then be confirmed by sending them an email with the date and time for their sitting @ the Badge Office located at 109 East North Street, Raleigh NC 27603.

All missed appointments will be canceled in ReaDY and will have to be resubmitted

Appointment times:

Monday-Friday from 8:00am to 12:00am and 1:00pm - 4:00pm

8.3.1 **It is the responsibility of the Building Coordinator** to forward an email to the employee receiving the badge that it is ready for pickup and that it is the employee's responsibility to pay for and pick up the badge.

8.3.2 Any (ACR) or (ACR-VR) that is considered a **re-print**, or the photo is **under five years old** will be printed and the Building Coordinator will receive an email that the badge is ready for pick up.

- Instructions on where Security Systems is located and the times available for pick-up will be the responsibility of the building Coordinator to pass on to the badge recipient.
- If an ***employee is responsible*** for payment, it is the responsibility of the Building Coordinator inform the employee of the cost of the badge and the option to purchase a lanyard.
- **Check and/or cash** are the only means of payment.
 - ❖ ***Exact change is required – we do not break bills***
 - ❖ ***Make all checks payable to NCDOA***

8.3.3 If an **Access Card Badge** is left in the office over **(30) thirty days**, the Building Coordinator will receive an email that the badge has not been picked up. If it has not been picked up within **(7) seven** business days of the reminder email it will be destroyed, and the **agency will be invoiced** for the card.

8.3.4 **Photo submissions** must follow these guidelines.

- a.) All photos will be from shoulders to above head respectively.
- b.) All photos must be taken with a **Red background** behind the individual.
- c.) Please submit all photos in the JPEG format.

8.4 **Access Changes:** If there is need for an employee to have additional access, deleted access, disabled access, temporarily or permanently, *do not use the (ACR forms)*. All **Card Access changes will be processed through the (ReaDY Badging Access Application)** by an approved Building Coordinator.

8.4.1 **Procedure:**

- **Under Contact information you put your name and telephone number.**
- **Method of payment - Other**
- **Property - Your building**
- **Reason for badge - Other**
- **Enter name - Name of badge i.e., Jane Doe**
- **Select Employment Status**
- **Enter brief Summary:**
- **Example “Please deactivate Jane Doe at cob 11/24/2020”**
- **Review**
- **Submit**

If an employee needs access to a building other than the one, he/she works in, the Building Coordinator must reach out via email (*copying to the security systems email account*) to the appropriate Building Coordinator responsible for that building for access approval. Once approved the requesting Building Coordinator would then submit the request through the **(ReaDY Badging Access Application)**

- **Multiple deletions may be added on (1) ReaDY request**
- **Multiple names requiring the same access may be on (1) Ready request**

8.5 **Building Coordinator Information:** All building coordinator information and inquiries can be obtained by contacting Security Systems @ 984-236-0460

8.6 **Badge & Lanyard Costs:** All information regarding the costs for Lanyards, Badges, Clips or Mini Prox Pucks can be obtained by calling Security Systems @ 984-236-0460

8.7 Scheduling Multiple Groups of 10 or more:

When there is a need to do a **remote photoshoot** i.e., groups of **10 or more** individuals, we recommend scheduling an event. This would be for multiple employees at one agency, groups of interns coming in, transition team members, and/or new elect groups. **An (ACR) [Access Card Request] or (ACR-VR) [ACR with Voter ID] request is still required for each employee in the group**

Please provide in your ReaDY Request:

- Company and Center Numbers that cover multiple employees may be submitted on (1) ReaDY request.
- Provide a complete roster of employees in the ReaDY App Portal as an attachment.(See example chart below)

Company & Center Number's		
13-0101	13-0102	13-0103
Employee Name		
Bob Smith	Robby Benson	Governor Cooper
Jane Doe	Robert Redford	Lt. Gov. Mark Robinson
Bill Johnson	Dawn Wells	
Candy VanHausen		

- Location of remote photoshoot
- Time and Date of remote photoshoot
- Number of persons attending to match all ACR's submitted in ReaDY

Please call the Badge Office @ 984-236-0460 with any questions regarding this option

8.8 ReaDY Portal Process for multiple employees under (1) Company and Center Number

Access Badge Request profile

Reason for badge request

- **New Hire**

Will this user be issued a state parking?

- **No**

Enter the full name(s) of the person(s) the card is being requested for.

- **Group of Interns – 30ppl**

Select the employment status.

- **Temporary Employee**

Enter a brief summary of the request for access.

- **New interns arriving for work. Requestor has intended to have the photoshoot at their building in room G102 on March 3rd, 2021 @ 10:00am**

Attach the badge access request forms here.

- **Attach all forms and roster here which should include date, times, and location of event**

8.9 **Example forms:** The most current image of the forms used for requesting an access card will be attached here to view. As revisions occur, they will be reflected at this part of the document. *(See Page 10 & 11. Below)*

VOTER REQUEST SUPPLEMENTAL FORM North
 Carolina Department of Administration Division of
 Facility Management-Security Systems
 984-236-0460

ACR-VRSF FORM

****THIS FORM MUST BE SIGNED BEFORE AN ID BADGE WITH VOTER ID PREFERENCES CAN BE ISSUED****

1. **EMPLOYEE INFORMATION - REQUESTOR**

EMPLOYEE NAME		BUILDING NAME	
PHONE NUMBER		ADDRESS	

2. **EMPLOYEES WILL BE INFORMED TO FOLLOW AND ACCEPT THE GUIDELINES BELOW BEFORE ID'S CAN BE DISTRIBUTED**

VOTER STATUTES FOR THE STATE OF NORTH CAROLINA

163 166.16. Requirement for photo identification to vote in person. (a) Photo Identification Required to Vote. – When a registered voter presents to vote in person, the registered voter shall produce any of the following forms of identification that contain a photograph of the registered voter: (1) Any of the following that is valid and unexpired, or has been expired for one year or less: a. A North Carolina drivers license. b. A special identification card for nonoperators issued under G.S. 20 37.7 or other form of nontemporary identification issued by the Division of Motor Vehicles of the Department of Transportation. c. A United States passport. d. A North Carolina voter photo identification card of the registered voter issued pursuant to G.S. 163 82.8A. e. Recodified as sub subdivision (a)(2)c. of this section by Session Laws 2019 22, s. 1, effective June 3, 2019. f. Reserved. g. A student identification card issued by a constituent institution of The University of North Carolina, a community college, as defined in G.S. 115D 2(2), or eligible private postsecondary institution as defined in G.S. 116 280(3), provided that card is issued in accordance with G.S. 163 166.17. h. An employee identification card issued by a state or local government entity, including a charter school, provided that card is issued in accordance with G.S. 163 166.18. i. A drivers license or special identification card for nonoperators issued by another state, the District of Columbia, or a territory or commonwealth of the United States, but only if the voter's voter registration was within 90 days of the election.

3. **EMPLOYEE VOTER INSTRUCTIONS BELOW:**

I UNDERSTAND THAT BY SIGNING THIS DOCUMENT THAT I AM BOUND BY THE VOTER STATUTES AND LAWS OF THE STATE OF NORTH CAROLINA. THIS ID BADGE PROVIDES ME THE ABILITY TO PRESENT THIS AS MY VOTER IDENTIFICATION AT AN ELECTION DAY POLLING CENTER. THIS VOTER PREFERENCE HAS BEEN APPROVED BY THE STATE LEGISLATURE AND HAS TERM LIMITS. STATE ID BADGES ARE VALID FOR 5 YEARS FROM THE RECEIPT OF ID PROVIDED BY THE EMPLOYEE BADGING OFFICE OF NORTH CAROLINA LOCATED AT 109 E NORTH STREET, RALEIGH, NC 27601.
 VOTER EXPIRATION DATE IS LOCATED ON THE BACK OF THE ID BADGE. IT IS THE RESPONSIBILITY OF THE EMPLOYEE TO MAINTAIN AND REPLACE ANY ID BADGE WITH THE VOTER PREFERENCE AFTER THE INTIAL ID IS PRINTED AND RECEIVED.

	BADGE OFFICER	<input type="text"/>
--	---------------	----------------------

YOU WILL SIGN FOR ID BADGE AT PICKUP

SIGNATURE:	<input type="text"/>		Date:	<input type="text"/>
TYPE NAME:	<input type="text"/>			

ACCESS CARD REQUEST
 North Carolina Department of Administration
 Division of Facility Management-Security Systems
 984-236-0460

Appointment Hours: Monday - Friday 8:00AM - 12:00 PM and 1:00 PM - 4:00 PM

1. AGENCY INFORMATION:

Rev. 2 - 08/14/2024

BUILDING COORDINATOR:	REQUEST DATE	
DEPARTMENT - DIVISION:	BUILDING NAME	
MSC# and Zip Only:	TELEPHONE #	

2. SELECT PAYMENT OPTION:

<input type="checkbox"/>	SEND INVOICE TO REQUESTING AGENCY	COMPANY & CENTER NUMBER	
<input type="checkbox"/>	PAYMENT BY EMPLOYEE (CHECK MADE PAYABLE TO DOA OR EXACT CHANGE REQUIRED)	DATE:	CHECK #: RECEIPT #:

3. COMPLETE THIS PORTION FOR EACH PERSON. (Pictures over 5 years old must be updated)

REASON FOR REQUEST:	ADD VOTER ID FACTOR	<input type="checkbox"/> YES	<input type="checkbox"/> NO	See supplemental form for rules
<input type="checkbox"/> BROKEN	<input type="checkbox"/> LOST	<input type="checkbox"/> STOPPED WORKING	<input type="checkbox"/> RETURN TO WORK	<input type="checkbox"/> NEW HIRE
<input type="checkbox"/> AGENCY CHANGE	<input type="checkbox"/> NAME CHANGE			
FIRST	MIDDLE	LAST		
DEPARTMENT: NO ABBREVIATIONS				
DIVISION: NO ABBREVIATIONS				
DRIVER'S LICENSE # LAST (4) ONLY:				
PHONE NUMBER WITH AREA CODE:				
EMPLOYEE START DATE: * required*			EMPLOYEE EMAIL:	

<input type="checkbox"/>	REGULAR DAY ACCESS 6:30 AM TO 6:30 PM, MONDAY THROUGH FRIDAY, NO HOLIDAYS	<input type="checkbox"/>	PERMANENT EMPLOYEE
<input type="checkbox"/>	EXTENDED DAY ACCESS 6:30 AM TO 10:30 PM, MONDAY THROUGH FRIDAY, NO HOLIDAYS	<input type="checkbox"/>	TEMPORARY EMPLOYEE
<input type="checkbox"/>	UNLIMITED ACCESS - 24 HOURS A DAY, 7 DAYS A WEEK, INCLUDES HOLIDAYS	<input type="checkbox"/>	BOARD OR COMMISSION MEMBER
<input type="checkbox"/>	ACCESS CARD EXPIRATION DATE: *REQUIRED FOR: Temps, Interns and Contractors*	<input type="checkbox"/>	CONTRACTOR *requires picture*
<input type="checkbox"/>	START DATE EXPIRATION DATE	<input type="checkbox"/>	INTERN

ACCESS NEEDED:	
ADDITIONAL INSTRUCTIONS:	

4. ONLY APPROVED BUILDING COORDINATORS ARE AUTHORIZED TO SUBMIT A COMPLETED REQUEST FORM

<https://sonc.assetworks.cloud/ready>

5. SECURITY SYSTEMS WILL CONTACT EACH PERSON TO SCHEDULE AN APPOINTMENT FOR AN ACCESS CARD.

6. GO TO <https://ncadmin.nc.gov/about-doa/divisions/facility-management> for additional guidelines and information.

Signature:

Date:

WORK ORDER NUMBER:	MATCH NUMBER:
COMPLETED BY:	COMPLETION DATE:
PROX CARD	LANYARD CLIP COMBO
CLIP ONLY	LANYARD ONLY
MINI-PROX DISC	
#9201	#9913
#9192	#9190
	#9221