

The purpose of this form is capture your “agency communication profile” for distribution of MFM reports and vehicle use reviews. Email the completed form (with Agency Head or Designee signature) to motorfleet@doa.nc.gov.

Agency Name: _____

Date: _____

Division (if applicable): _____

Onboarding Directions: To update the MFM system with your current agency profile, insert the new name, title, and contact information in the fields. The new contact information submitted here will replace the existing system contact info. Only change the contact profile you need to update and leave the other profiles blank. You can update 1, 2, or all 3 contact profiles.

Agency Head or Agency Head Designee	
Title:	
Name:	
Email:	

Chief Financial Officer	
Title:	
Name:	
Email:	

Agency Fleet Coordinator		Alternate AFC <i>(if needed)</i>
Title:		
Name:		
Phone:		
Email:		

Agency Authorization: Must be signed by Agency Head or Designee

 Print

 Date

 Sign

Return completed form to: motorfleet@doa.nc.gov.