

## **Third-Party Website Account Authorization**

You can authorize access to your policy details online. You may wish to provide this to designated third parties (e.g., accounting firms or payroll agencies). The designated user will be able to make online payments to your policy. Any designated user will have access to all policy details, including claim information.

To authorize SIF to grant access to your policy information online, please complete, sign, and submit this form.

## Submit by one of the following methods:

- Upload saved file to our website at www.idahosif.org/document/upload
- Email as an attachment to webfax@idahosif.org
- Mail to SIF, PO Box 83720, Boise ID 83720-0044

I CERTIFY that I am an owner or managing authority of the policy noted below and am authorized to request username, password, and access permissions for the person named below (the Designated User).

I ACKNOWLEDGE that the Designated User will have access to confidential information and that the unauthorized review, use, disclosure, or distribution of confidential information could subject the Designated User to possible civil and criminal penalties.

I ACKNOWLEDGE that if I provide a billing address below, all payroll reports and invoices will only be mailed to that address. (All information will still be available online via the Portal.)

Policy #:	Insured Entity Name:		
Signature of Owner/Managing A	uthority	 Date	
Printed name		Phone	
Full name of Designated User: _			
Title or organization name:			
Email address:			
Billing address (if appropriate): _			
Desired or existing username: _		(no special ch	aracters)
Phone:			

**Note:** All information is required to process this request. Online payments and online payroll reporting will be available 1 - 2 business days after processing. If we create a user account, a temporary password will be emailed to you at the address supplied above.