



# Missouri Elevator Database

## APPLICATION FOR USER ACCESS

MISSOURI DIVISION OF FIRE SAFETY  
**ELEVATOR SAFETY UNIT**  
 PO BOX 844  
 JEFFERSON CITY, MO 65102  
 573-751-2930 FAX 573-526-5971

NAME: (LAST, FIRST, MI)	
COMPANY NAME:	
ADDRESS, CITY, STATE, ZIP:	
PHONE:	E-MAIL ADDRESS:
MO LICENSE #:	QEI OR ICC #:
<p>Please insert your <b>USER ID</b> and <b>PASSWORD</b> below. User ID will consist of your first name, as it appears above, followed by a space and then your last name. <b>EXAMPLE: Larry Watson</b></p> <p>Passwords are your choice, but limited to 8 characters.</p> <p>The User ID is used to determine what components of the Elevator Inspection System users will be allowed access and what functions may be performed.</p>	
USER IDENTIFICATION CODE	USER PASSWORD
<p>Use of the Missouri Elevator Database is intended for the conduction of essential business only and will be audited and monitored.</p> <p>Each user is responsible for all use associated with their assigned identification code, therefore identification codes and passwords should be kept confidential. Users must guard against unauthorized access to the Elevator Safety Inspection Management System.</p> <p>If you believe your password has been compromised contact the Elevator Safety Unit for reassignment.</p>	
I hereby agree with the conditions stated above: (SIGNATURE REQUIRED)	
SIGNATURE, DATE	
MISSOURI DIVISION OF FIRE SAFETY APPROVAL:	
SIGNATURE, DATE	