REQUEST FOR CPMS/ICUC SYSTEMS ACCESS

Check all that apply

- ☐ DefPAC Access
- ☐ DOL Agency Query System (OWCP maintained)
- ☐ DIUCS v.2.1 Injury/EDI Access Only
- ☐ DIUCS v.2.1 Unemployment Access Only
- ☐ DIUCS v.2.1 Injury/EDI/Unemployment Access

USER INFORMATION

Last, First, Middle

SSN Last Four

Position Title

Comm. Phone

DSN

Individual email

EDI email

AGENCY INFORMATION

(Agency CPO/CSU may be found in the first two digits of your position number.)

Component

Agency CPO or CSU

ICPA Office Name and Mailing Address

For Unemployment Only - Agency POI or SON (may be f ound in block 48 on Form SF50)

For Injury Compensation Only - Enter all assigned DOL Chargeback Codes (4 digit numeric)

For Injury Compensation Only - Enter all assigned DOL CPO Codes (2 character Alpha)

Requestor Signature

Date

Approving Official

Date

DoD Liaison Signature

Date

Please print, sign and fax the form to your ICUC liaison for review and signature.

Reset Form