

**CARBON COUNTY
ONLINE RECORD ACCESS REQUEST FORM**

Contact Information

Name (Last & First) _____
Company Name _____
Mailing Address _____
City State Zip
Phone () _____ E-mail _____

User Information

To make the system easier for you to access, we are allowing you to choose your own username and password. Please complete this section and we will attempt to assign you the name and password you would like if it is available. You may have one username and password for your company or if you'd prefer, you can apply for one for each user.

Desired Username _____
Desired Password (Must be different than the username) _____

As this office records documents, the clerks validate them. This means the image is scanned and the indexed information is double checked for accuracy. Each night, validated information is updated to the website and available for your use.

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Signature of user Date