

APPOINTMENT OF AGENCY REGULATORY COORDINATOR

1. Agency Name:	
Address:	
2. The individual negreed below is experiented as the exer	an manulatam a a andinatam
2. The individual named below is appointed as the agen	cy regulatory coordinator:
Name:	
Title:	
Telephone:	
Email address:	
3. The new regulatory coordinator replaces this person	:
Name:	
Email address:	
Please make the following change to the RIS user acco	unt for the person being replaced:
☐ Close this account.	
$\hfill\Box$ Change the access level from full coordinator to edit.	
$\hfill \Box$ Leave access level at full coordinator and only remove	designation as regulatory coordinator.
4. The individual named here makes this appointment (1 designated by the agency head to make such appointm	
Name:	
Title:	
Telephone:	
Email address:	
Signature:	Date:
5. File this form, along with an RIS User Request Form f	or the new agency regulatory coordinator, by

5. File this form, along with an RIS User Request Form for the new agency regulatory coordinator, by emailing it to: varegs@dls.virginia.gov.

Questions: Contact Nikki Clemons, via telephone at (804) 896-1885, or via email at nclemons@dls.virginia.gov.

Registrar's Office, telephone (804) 896-1810.

DLAS Help Desk email: helpdesk@dlas.virginia.gov.