

MS NIBRS Repository (Crime Insight) Additional Users Form

Please complete the form below to request additional usernames and passwords for individuals in your agency to have access to enter data into the repository. If you have any questions, please contact us at 601-933-9448/9449.

Agency Name: _____

Additional User 1

Name _____
Title _____
_____ Phone _____
Email _____

Additional User 2

Name _____
Title _____
_____ Phone _____
Email _____

Additional User 3

Name _____
Title _____
_____ Phone _____
Email _____

Agency Head or RAC Signature: _____ Date: _____