

## WIFS AUTHORIZED USER APPLICATION

New Application

Update Application

General Information	
Date of Application	
State	
ID	
WAFC	
Point of Contact Information	
First Name	
Last Name	
E-mail	
Phone	
Address	
City	
WorkStation Information	
E-mail	
Phone	
Address	
City	
Vendor	
Operating System	
FAA Approval Authority	
Approved Date	
Approved By	
For AWC use only	
Entered Date	
Entered By	
User Name	
Password	

ID Sent

Password Sent