



WebEOC Account Request Form

WebEOC Administrator

Phone: (769) 233-3671

E-mail: webeoc@mema.ms.gov

Emergency Manager/ Supervisor Information

Name:

Organization:

City:

County:

Email Address:

Please include below the name(s), e-mail address(s), and corresponding position number(s) for which the user should have access.

For example:

Bob Miller, bob.miller@test.com; Position(s): Smallville County
John Smith, john.smith@test.com; Position(s): Holly Frontier Refinery

To expedite processing, please provide all information in the proper format.

Mississippi Emergency Management reserves the right to deny, revoke, or disable access to anyone under any circumstance at any time.

Positions Available:

County Position

Industry Position

Your industry you work for (for the Spill Database/Form A)

ESF Position within the State Emergency Operations Center (SEOC)

By selecting this you agree to the following terms and conditions:

I understand this form serves as my authorization and approval for the above individuals to access WebEOC as part of my jurisdiction in the position(s) listed.

I have read the position descriptions and understand the permissions associated with the positions for which I am requesting access.

*****Please allow up to five business days for processing.