



Town Of Durham Email Request Form

Please fill out all info as applicable (* Password requires Uppercase, Lowercase, Number & at least one Special Character)

First Name _____

Last Name _____

Job
Title/Group
Association &
Role

Address _____

City/State/Zip _____

Phone _____ Requested
Password* _____

Personal
Email

Please Return Form to IT

_____ For use by IT _____

.gov email: _____

Microsoft License: _____

Email Created:

IT SIGNATURE _____

