

2020 AZSITE Annual Database Use Application Form

Complete this application for an annual (calendar year) AZSITE Cultural Resource Inventory user agreement. The AZSITE Cultural Resource Inventory is a collaborative project of the AZSITE Consortium (the Arizona State Museum, the School of Human Evolution & Social Change (SHESC) at Arizona State University, the Museum of Northern Arizona, and the State Historic Preservation Office). The inventory contains the cultural resource records of those four institution and other land jurisdictions as submitted.

AZSITE is available to authorized users through the institution or company for which they work. To qualify for access to the AZSITE Cultural Resources Inventory, a staff member of the organization must meet the qualifications for access as stated in the policy for AZSITE access (link to AZSITE Access Policies). Individual users must meet these standards or be employees or students in good standing of an organization in which at least one authorized AZSITE user meets these standards. Qualifying organizations shall follow the directions below for requesting access to the AZSITE Cultural Resources Inventory.

1. Complete and sign the below AZSITE DATABASE USE APPLICATION. Under the section labeled "Reason for using AZSITE" please include a statement as to the nature of your business (e.g., archaeological consulting firm, engineering firm, utility, etc.) as well as a statement of reason for using the file. Under the section labeled "Authorized Users from this Institution/Agency," list all staff of your company or agency that you authorize to access the database. If a proposed user is new to your agency, please attach her/his curriculum vitae (CV) or résumé to your application. Your company or agency will be responsible for all charges incurred (e.g., document download, request for shape files) by its staff. Each proposed user must accept the terms of the user agreement.
2. Return the completed form to: James Cogswell, State Historic Preservation Office (SHPO), 1100 W. Washington, Phoenix, AZ 85007, or submit via email to: jcogswell@azstateparks.gov
3. After the SHPO approves your application, the institution will be notified by email from AZSITE which users specified on the application have been approved for access to the database. The AZSITE DBA will email instructions on how each approved individual is to complete an on-line request for a username and password. Accounts will be enabled approximately 72 hours after a username and password is requested.
4. There is a fee for accessing the AZSITE System. Consult the Fee Structure Table on the AZSITE website for more information. Invoices will be sent upon SHPOs approval of your access account. Information on how to pay via check or credit card will be included on the invoice. Failure to complete payment within 30 days of being granted access will result in the company's or agency's AZSITE privileges being revoked.

AZSITE DATABASE USE APPLICATION
Calendar Year 2020

Date _____

Institution _____

Contact name _____

Position/Title _____

(The person to be contacted for administrative purposes, not necessarily the same as authorizing signatory.)

Address _____

City/State/ZIP _____

Phone _____ FAX _____ Email _____

Reason for using AZSITE _____

Authorized Users from this Institution/Agency: By signing below, each authorized user signifies acceptance of the terms of the attached agreement. All individuals new to your agency or to using AZSITE must include a CV/resume with this application. Printed Name, Signature and Email are required for each individual.

1. _____
Printed Name Signature Email

2. _____
Printed Name Signature Email

3. _____
Printed Name Signature Email

4.	_____	_____	_____
	Printed Name	Signature	Email
5.	_____	_____	_____
	Printed Name	Signature	Email
6.	_____	_____	_____
	Printed Name	Signature	Email
7.	_____	_____	_____
	Printed Name	Signature	Email
8.	_____	_____	_____
	Printed Name	Signature	Email
9.	_____	_____	_____
	Printed Name	Signature	Email
10.	_____	_____	_____
	Printed Name	Signature	Email
11.	_____	_____	_____
	Printed Name	Signature	Email
12.	_____	_____	_____
	Printed Name	Signature	Email
13.	_____	_____	_____
	Printed Name	Signature	Email
14.	_____	_____	_____
	Printed Name	Signature	Email
15.	_____	_____	_____
	Printed Name	Signature	Email

Attach additional sheets as necessary.

By signing this agreement, you signify that you understand and accept the terms of this agreement.

I, the undersigned applicant, request an agreement, as checked below, for the AZSITE Cultural Resource Inventory:

___ Annual Account (calendar year)

___ Small – 3 or fewer users within a company/agency

___ Medium – up to 9 users within a company/agency

___ Large – up to 15 users within a company/agency

___ Monthly (30 consecutive days, maximum of 3 months, only one (1) authorized user)

___ 30-Day Account (30 non-consecutive days, only one (1) authorized user)

___ Educational or Non/Not-for-Profit Account (non/not-for-profit requires 501(c)(3). Educational accounts limited to accredited educational institutions.)

___ Municipality User Account (Limited Geographic Area)

The information contained in AZSITE is confidential and I agree to the following conditions to protect the confidentiality of the AZSITE records. I agree to ensure that all representatives of my company or agency who have access to AZSITE records abide by the rules.

1. I understand that access may be interrupted without warning due to technical difficulties, shutdowns, and limited connections.
2. I understand that the information contained within AZSITE is compiled from various sources and that while AZSITE Consortium member agencies attempt to confirm data accuracy at the time of its submission to the files, no guarantees as to accuracy or completeness are made. I further understand that it is my responsibility, if I find inaccuracies, to report them in writing.
3. I agree not to distribute or disclose specific site location information in public documents or make this information available to unauthorized individuals within or outside of my institution or agency. Unauthorized access does not include uploading of shape files into GPS units for survey purposes or for report preparation or editing. I understand that if my agency/institution is required to maintain public records they will be maintained in a way that does not disclose confidential information pursuant to ARS §39-125 and/or the Freedom of Information Act.
4. I understand that while certain projects may be sponsored by third party agencies, I will not share or distribute the ‘raw’ AZSITE data, exact point locations, or maps larger than 1:125,000 showing resource locations to those third parties with the following exceptions:
 - a. The third party has AZSITE Access.
 - b. Corporate and government clients who need the data for land use, engineering or environmental reports or maps with the understanding that AZSITE users are responsible for ensuring that their clients understand all AZSITE cultural resources

data are confidential, an AZSITE-licensed archaeologist MUST be contacted regarding data interpretation, and data use is monitored by the AZSITE Consortium Board.

5. I understand that data must be protected by placing it on a stand-alone workstation or a workstation with appropriate firewall protection so that no unauthorized access may occur. I further understand that the data will be placed in password protected files. I understand that online virtual, cloud-like servers are not secure (e.g., ESRI online service or Microsoft Cloud) and cannot be used to store or transmit AZSITE data.
 - a. In the case of Government Entities, (e.g., BLM or USDA, DOD), data may be stored on their central server provided that server is password protected and security protocols are in place regarding who may access these data.
6. I understand that electronic and printed data may be used in cultural resource management reports, dissertations, professional archaeology publications, or at professional archaeology conferences without the written approval of the AZSITE Consortium Board. Any other publication must receive advance written approval from the AZSITE Consortium Board.
7. I understand and acknowledge that many of the archaeological and historic properties maintained in the AZSITE Cultural Resource Inventory are under the jurisdiction, ownership, or control of other agencies such as state and federal agencies, private individuals, and tribal governments and may be afforded additional levels of legislative protection related to the restrictions on cultural resource information, as exclusions from the Freedom of Information Act. I agree to obtain all necessary tribal, state, or federal permits as appropriate. I agree to use AZSITE information only in compliance with applicable tribal, municipal, county, state, and federal laws and regulations, including, but not limited to, the National Historic Preservation Act of 1966 [54 U.S.C. §300101 et seq.] and its Section 106 implementing regulations, 36 CFR Part 800; the Archaeological Resources Protection Act of 1979 [16USC470aa et seq.]; the State Historic Preservation Act (ARS §41-861 through §41-865); and ARS §39-125 (effective August 21, 1998).
8. I understand that each member of my institution needing access to the Inventory must apply for his or her own user account and password. I understand that no user must discuss or divulge his or her user name and password to any third party, or use his or her account to log another party on the AZSITE Cultural Resource Inventory. I understand that it is my responsibility to notify SHPO and to contact the Database Administrator when a name needs to be removed from the account.
9. I understand that where necessary, access has been suppressed to records from lands under the management of institutions that have not agreed to participate in the AZSITE Cultural Resource Inventory. I understand that to obtain information on these lands I must contact the appropriate land manager.
10. I understand that I must renew this agreement annually.
11. I understand that, to protect sensitive archaeological information, when this institution

completes a project and all curatorial requirements have been met, GIS data received from AZSITE relevant to the project will be deleted from the institution's computer files.

12. I understand that when this institution no longer holds an AZSITE use agreement it is our responsibility to delete all GIS data provided by AZSITE records from our electronic files.
13. I agree to immediately report any and all system security violations, whether actual or potential, to the AZSITE DBA.
14. I understand that access to the AZSITE Cultural Resource Inventory does not constitute permission to enter onto or conduct archaeological investigations on any of the lands for which cultural resource records are maintained in the Inventory. I further understand that it is my responsibility to consult with appropriate federal, state, or tribal land managers, or private property owners, before instituting any archaeological or cultural resource investigations on, or related to, their lands and that I must forward copies of the products of such research to appropriate federal, state or tribal land managers.
15. I understand that my institution will be held responsible for misuse of the AZSITE Cultural Resource Inventory under this agreement. I understand that evidence of failure to comply with the above conditions and misuse of this agreement will result in immediate suspension of all accounts under this agreement pending review by the AZSITE Consortium and will carry implications for agreement renewal. I understand that, in addition to suspension of privileges and revocation of this user agreement, violation of the terms of this agreement may result in applicable civil or criminal penalties.

Signature of applicant _____

Position/Title _____ Date _____

(The signing authority may not be a registered user, however they must meet the current qualifications for accessing AZSITE and take responsibility for the security of any AZSITE data acquired by the individuals listed above.)

State Historic Preservation Office approval:

_____ Date _____