



# GAMING LABORATORY

## FILE TRANSFER SERVICE ACCESS FORM

*Complete this form to request access to the MGCB File Transfer Service which will allow users to submit electronic submission information to the MGCB. List all individuals who need access to send submission documentation and required electronic files to the MGCB Lab. Please note that shared/group email addresses may also be listed to give multiple users access to the same FTP account.*

Company Name		Licensee Number	
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First Name	Last Name	Position	Email Address

Requested By (Name) \_\_\_\_\_

Phone Number \_\_\_\_\_

Date \_\_\_\_\_

FTS access request forms should be sent via email to [MGCB-FTSAccessRequest@michigan.gov](mailto:MGCB-FTSAccessRequest@michigan.gov)