



Information Technology

Bill Code Action Request Form

The completed form should be sent via email to Billing Services Support at dit.incidents@its.nc.gov. If you have any questions, please contact the DIT Customer Service Center at 919-754-6000 or toll free at 1-800-722-3946.

(Please allow 7 days for processing by DIT)

Action Request (Check the appropriate box)

ADD To Request a new Bill Code (a new code will be assigned by DIT)

UPDATE To Correct errors or make changes to specific items of an existing Bill Code (specify your assigned three character code in the Bill Code field)

DELETE To Terminate an existing account code (specify your assigned three character code in the Bill Code field)
Note: A separate Remedy ticket needs to be submitted to each Service Provider (i.e., Email, Desktop, Batch jobs, etc.) utilizing this bill code to ensure service charges are discontinued.

Dept Code	Bill Code

Customer Information (Specify your business Federal Tax Identification Number and Business or Agency Name)

		[For DIT Use Only]
Federal Tax ID	Agency or Business Name	Customer Type (Federal, Local, State, Private)

Agency Service Information (Specify the title of the application, project, department or other purpose for this request)

Description of Service	Mainframe Access (Y or N) (Circle One)

Accounting Distribution (specify the budget code in your chart of accounts from which invoices will be paid by your organization)

Notes: (1) Enter the budget code in the format according to the type of accounting system used by your organization
(2) This information will appear on the invoice you receive from DIT and is for informational purposes only

Fiscal Office Information (Specify the contact information of your Financial Office and the email address where the invoice will be sent)

Fiscal Officer Name & Title			
	Last	First	Title
	Email Address		Phone Number
Fiscal Office Mailing Address	Address 1		
	Address 2		
	City	State	Zip Code

Responsible Person (Specify the contact information of the person in your organization responsible for administration of Bill Codes)

Responsible for Application			
	Last	First	Title
	Email Address		Phone Number

Agency Certification (Certification is mandatory. The Fiscal Officer's signature is required)

Fiscal Officer		Date:	
Responsible Person		Date:	

Invoices are due and payable in full upon receipt.

DIT reserves the right to revoke access if billing and access conditions are violated.