County of San Diego, Planning & Development Services
ACCELA CITIZEN ACCESS Registered User form for the Financially Responsible Party and any (optional) Designated Users
SUPPORT SERVICES DIVISION

PART A: FINANCIALLY RESPONSIBLE PARTY:

I, the undersigned Financially Responsible Party (FINRESP), request to set up Accela Citizen Access (ACA) and/or designate the following Depositor(s) listed below as the authorized user(s) to make online deposits for the trust accounts listed below.

FINRESP Name or Organization:_____

Customer # *(see monthly statement)* _____

Mailing Address:_____

Contact Phone: _____ Email: _____

Register for ACA at: https://publicservices.sdcounty.ca.gov/citizenaccess. Enter ACA Account Info below.

FINRESP Registered ACA User ID: _____

FINRESP Registered ACA User Email: _____ *(must match email on ACA)*

TRUST ACCOUNT # *(see monthly statement)*

Trust Account #: _____ #: _____

Trust Account #: _____ #: _____

Financially Responsible Party Signature: _____

PART B: DEPOSITOR(s) *(optional)*

I, the designated Depositor(s), understand that all funds deposited into the trust account(s) shall be held by the County in an account under the name of the Financially Responsible Party. The FINRESP shall be considered the owner of all funds in said account, and the Depositor(s) (if different from the FINRESP) releases any interest to said funds.

(1) DEPOSITOR Name:_____ Signature:_____

DEPOSITOR Registered ACA User ID: _____ Date: _____

DEPOSITOR Registered ACA User Email:_____ *(must match email on ACA)*

2) DEPOSITOR Name:_____ Signature:_____

DEPOSITOR Registered ACA User ID: _____ Date: _____

DEPOSITOR Registered ACA User Email:_____ *(must match email on ACA)*

Upon completion of this form please give it to PDS counter staff or email the form to LUEGTrustAccts@sdcounty.ca.gov or mail to: Planning & Development Services, Trust Accounts, 5510 Overland Ave., Suite 310, San Diego CA 92123.