



ICS ACCESS VIA THE INTERNET ENROLLMENT FORM

In order to access your ICS features via the Internet, your device must meet or exceed the requirements listed below:

**Operating Systems:
Windows 7 or newer**

**Browsers:
Microsoft Internet Explorer version 10 or newer
Google Chrome
Microsoft Edge**

ICS Administrator Name#1*: _____
(Last Name, First Name)

Title*: _____

Administrator Password*: _____
(Administrator password or phrase)

Email*: _____

Phone*: _____

ICS Administrator Name#2: _____
(Last Name, First Name)

Title*: _____

Administrator Password*: _____
(Administrator password or phrase)

Email*: _____

Phone*: _____

Requested Users*:

1) _____
(Last Name, First Name)

_____ *(Phone Number)*

_____ *(Email Address)*

2) _____
(Last Name, First Name)

_____ *(Phone Number)*

_____ *(Email Address)*

3) _____
(Last Name, First Name)

_____ *(Phone Number)*

_____ *(Email Address)*

4) _____
(Last Name, First Name)

_____ *(Phone Number)*

_____ *(Email Address)*

***Indicates required information, otherwise there may be a delay in processing your enrollment form. Please allow 1-2 business days to process.**

Administrator is responsible for the activity of the members of their dealership/distributorship.

_____ *Name of Dealer Principal/General Manager*

_____ *Dealership Name*

_____ *Signature of Dealer Principal/General Manager*

_____ *Dealer Code*

_____ *Date*

Please email or fax the completed enrollment form to the ICS Support Center at Support.Center@isza.com or **fax the form to (714) 736-4412**. If you have any questions, please call the ICS Support Center at (800) 526-0044.

For ICS Support Center Use:
