



**REQUEST FOR SYSTEM ACCESS/
ACCESS REVOCATION**
PRINT CLEARLY / PROVIDE COMPLETE INFORMATION

BIR Form No.
0044
Revised October 2018

User / Requester (Please Print)

1. Last Name 2. First Name 3. Middle Name

4. Office BIR Non-BIR NO RR RDC RDO specify office/ section/unit

5. Job Designation/Role

6. Log-in

7. Signature 8. Contact Number/s (Telephone / Mobile)

9. BIR E-Mail Address

10. Date (mm/dd/yyyy)

11. Type of Request

A. SYSTEM ACCESS

Specify System / Purpose

Regular Special

New Account
 Replace Job Designation
 Add Job Designation
 Reactivation of Suspended Account
 Resetting of Password
 Extension of Access
 Others pls. specify _____

Validity of Special Access Request

mm / dd / yyyy

B. ACCESS REVOCATION

Specify System

Deletion Suspension

Leave of Absence <indicate period> _____
 Change of Office <indicate RTAO No.> _____
 Resignation <indicate effectivity date> _____
 Retirement <indicate effectivity date> _____
 Others _____

Special Instructions prior to Deletion of Account:
 (APPLICABLE TO USERS WITH OS ACCESS ONLY)

Move Files from User Home Directory To Directory

Technical Users only

12. ITS Server CDF Manila QCY RR7 Makati Vis-Min LTD

Type: Production Testing Development Training

13. Security Management Division ONLY

Existing Role(s) New Role/s

Specify role/s

Remarks

Implementation In-house Outsource Requirements Submitted Acceptable Use Policy Non-Disclosure Agreement Justification letter Others _____

14. AUTHORIZING OFFICIAL

Head of Office (ACIR/Reg'l Dir./Div. Chief/RDO) or Process Owner / Project Manager

Signature over Printed Name

Date (mm/dd/yyyy)

15. EVALUATED BY

Head, Revenue Data Center

Signature over Printed Name

Date (mm/dd/yyyy)

16. VALIDATED BY

Chief, Security Management Division

Signature over Printed Name

Date (mm/dd/yyyy)

17. IMPLEMENTED BY

System Administrator Database Administrator

Signature over Printed Name

Date (mm/dd/yyyy)