

## Request Form

Registration/ Change of privileges for IREPS.

\*Request for:           Registration                    Change of privileges

\*User type:            New User:                    Existing User           

\*Email ID: \_\_\_\_\_

(\*Email Id will be used as an Id for the user to log in)

\*First

Middle

\*Last Name

User Name: \_\_\_\_\_

\*Designation: \_\_\_\_\_ PF no. \_\_\_\_\_

\*Grade: GM / PHOD / SAG / SG / JAG / SS / JS / OS / OTHERS.

\*Department: \_\_\_\_\_ Section(s): \_\_\_\_\_

\*Functions            Sign Tender Documents

                          Tender Box Opening

                          Co-ordination

\*Date of Birth: (DD/MM/YYYY) \_\_\_\_/\_\_\_\_/\_\_\_\_ \* Gender   M    F

Phone No.: \*Office \_\_\_\_\_

                  Residence. \_\_\_\_\_

                  Mobile No. \_\_\_\_\_

\*Digital Signature Certificate (Class II or higher)   Yes  No

Signature of Applicant

Signature of Controlling Officer

**Note:** - To be printed and sent to Department EPS Administrator. Department Administrator will take necessary action for registration of users/change of privileges. Department Administrator will require the public key of new user who submits the request for registration of new user.

(Fields Marked \* are mandatory)