



## Authority

### ASYCUDA WORLD INTERNAL REQUEST/ DEACTIVATE FORM

This form is to be completed and submitted to the ASYCUDA unit under the Customs Department. The form consists of 4 pages

This form is divided into 4 sections:

**SECTION A:** Should be completed by the requesting manager/ supervisor

**SECTION B:** Completed for requesting user access to the system

**SECTION C:** Deactivate a user profile

**SECTION D:** Completed by Customs Management and AW Administrator

**SECTION A: This part is to be completed by the requesting manager/ supervisor**

MANAGER/ SUPERVISOR DETAILS			
NAME			
DESIGNATION		DIVISION	
TELEPHONE (W)		EMAIL	
SIGNATURE		DATE	

BUSINESS UNITS	ADD	REMOVE
Customs cashier	<input type="checkbox"/>	<input type="checkbox"/>
Customs manifest	<input type="checkbox"/>	<input type="checkbox"/>
Back-Office Manager	<input type="checkbox"/>	<input type="checkbox"/>
Back-Office Supervisor	<input type="checkbox"/>	<input type="checkbox"/>
Examiner	<input type="checkbox"/>	<input type="checkbox"/>
General Manager	<input type="checkbox"/>	<input type="checkbox"/>



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Manifest Officer	<input type="checkbox"/>	<input type="checkbox"/>
Station Manager	<input type="checkbox"/>	<input type="checkbox"/>
Station Supervisor	<input type="checkbox"/>	<input type="checkbox"/>
Tariff Management	<input type="checkbox"/>	<input type="checkbox"/>
Warehouse Officer	<input type="checkbox"/>	<input type="checkbox"/>
Exit Officer	<input type="checkbox"/>	<input type="checkbox"/>
Customs Broker	<input type="checkbox"/>	<input type="checkbox"/>
Form E Officer	<input type="checkbox"/>	<input type="checkbox"/>
Refund Officer	<input type="checkbox"/>	<input type="checkbox"/>
Functional Officer	<input type="checkbox"/>	<input type="checkbox"/>
Technical Officer	<input type="checkbox"/>	<input type="checkbox"/>
Admin	<input type="checkbox"/>	<input type="checkbox"/>
CPH Officer	<input type="checkbox"/>	<input type="checkbox"/>
CPH Supervisor	<input type="checkbox"/>	<input type="checkbox"/>
CPH Manager	<input type="checkbox"/>	<input type="checkbox"/>

### OFFICE

(tick to Add ,cross to Remove)

SZCHQ	SZICD	SZLAV	SZMAH	SZBBD	SZNGW	SZSHO	SZSAN	SZLOM	SZBBD	SZBBR



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SZMRO SZNSA SZNHL SZSID SZGEG SZLUN SZNSO SZMHL SZMPO SZMAT SZBUL

          

SZMPA SZMTS SZSIC SZMAN SZPCC SZMTC SZCBO SZSCC SZNTO SZMSC

         

### SECTION B: This part is to be completed by the user requesting access

USER DETAILS			
FIRSTNAME	MIDDLENAME	LASTNAME	
EMPLOYEE NO.	DESIGNATION	PHONE	
DIVISION	DEPARTMENT		
LOCATION	EMAIL		

I ..... hereby confirm that I was trained on the modules being applied for, and that I am competent to use it.

THE USER ACCEPTS THE CONDITIONS OF USAGE AS SET BY THE SWAZILAND REVENUE AUTHORITY. THE USER FURTHER ACCEPTS TO BE BOUND BY THE PROVISIONS OF SECTIONS 2 and 39 OF THE CUSTOMS AND EXCISE ACT, 1971 (AS AMENDED) AS READ WITH SECTIONS 2 and 5 to 8 OF THE ELECTRONIC RECORDS (EVIDENCE) ACT, 2009.

Signature:.....

DATE:...../...../.....

### SECTION C: to be completed when deactivating a user profile



## Authority

USER DETAILS			
FIRSTNAME	MIDDLENAME	LASTNAME	
AW USERNAME	LOCATION		
COMMENTS ON DEACTIVATION			

EFFECTIVE DATE	
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Manager/ Supervisor:.....

DATE:...../...../.....

### SECTION D: to be completed by Customs Management and AW Administrator

FOR CUSTOMS M NAGEMENT					
NAME					
DESIGNATION		DIVISION			
TELEPHONE (W)		EMAIL			
APPROVED/REJECTED		SIGNATURE		DATE	

AW	Proficiency Requirement			
Performance	Satisfactory	<input type="checkbox"/>	Non Satisfactory	<input type="checkbox"/>
COMMENTS				
ACTIONED BY		DESIGNATION		
SIGNATURE		DATE		

### CONFIDENTIALITY AGREEMENT

In consideration of my employment with the Swaziland Revenue Authority, I agree to the following terms:



# Authority

# Swaziland Revenue

1. All information accessed through the SRA network and systems is confidential and may only be disclosed in strict accordance with SRA's policies.
2. To protect user and system files from unauthorized access.
3. I will not create any false record in the SRA official records. I understand that in the case of programming staff authorized to conduct system testing, the creation of a false record is considered a temporary test result and is permitted under the program conditions.
4. Upon the termination of my employment, I will continue to treat all information of the SRA as confidential and I will immediately return all documents and/or materials belonging to SRA, including methods of providing access to such information.
5. Failing to comply with the above requirements may result in disciplinary action against me including loss of privileges, or termination of my employment. I acknowledge that the terms of this Confidentiality Agreement will survive the expiry of my employment with SRA, and that SRA reserves the right to seek prosecution of an individual committing an infraction of the terms of this Agreement, regardless of the individual's present status of employment.

## USER ACKNOWLEDGEMENT

The requestor acknowledges that he/she has read the SRA Account Management Policy. The requestor also acknowledges that this account provides special privileges driven by business necessity including direct access to important files and critical system functions. A large degree of trust is placed in a person in these key roles, and it is required that: they will act in the Authority's best interest, the privileged access will only be used for SRA business, all related SRA policies and procedures will be strictly adhered to, and all applicable laws and client contract requirements will be adhered to. The requestor will immediately report any issues they discover relating to the security or integrity of the data and systems they are tasked to administer or access. The requestor acknowledges that failure to comply with referenced policies procedures, laws and contract requirements could result in disciplinary action, up to and including termination and/or criminal prosecution.