



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

BIR Form No.

0044

Revised February, 2021

User / Requester (Please Print)**1. Last Name**

2. First Name

3. Middle Name

4. Office BIR Non-BIR

<input type="checkbox"/> NO	<input type="checkbox"/> RR
<input type="checkbox"/> RDC	<input type="checkbox"/> RDO

Specify Office / Division

5. Job Designation/Role

Specify Section

6. Log-in

7. Contact Number/s (Telephone / Mobile)

8. BIR E-Mail Address

9. Date (mm/dd/yyyy)
 / /
10. Type of Request**A. SYSTEM ACCESS****System / Purpose****Group Supervisor**

Complete Name

(Case Management System - IRIS) only

 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**System / Purpose** 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:
(USERS WITH OS ACCESS ONLY)**

Move Files from User Home Directory To Directory

11. USER / REQUESTER SIGNATURE

Signature over Printed Name

Date (mm/dd/yyyy)
 / /
12. 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)
 / /
*Technical Users only***13. Application / System** ITS IRIS eServices: _____ Others: _____**14. ITS Server** CDF Manila QCY RR7 Makati Vis-Min LTD**Type** Production Testing Development Training**15. Security Management Division / Revenue Data Center**

- Existing Role/s
- New Role/s

Remarks

Implementation

- In-house
- Outsource

Requirements Submitted

- Acceptable Use Policy
- Non-Disclosure Agreement

- Justification letter
- Others

15. EVALUATED / VALIDATED BY

Chief, Security Management Division / Head, Revenue Data Center

Signature over Printed Name

Date (mm/dd/yyyy)
 / /
16. IMPLEMENTED BY Systems Administrator Database Administrator

Signature over Printed Name

Date (mm/dd/yyyy)
 / /