



Date received: _

Date processed: _

VAT Reg No: VAT20130192 | BRN: C07012581 t. (230) 401-6800 | Hotline: [Local] 86205, [Int.] (230) 460 7205 mnsmail@mns.mu | customer.service@mns.mu

mns.mu

ADDITIONAL USER REC	QUEST FORM		Ref: USRADD-03
System: CNP, CBRIS, EAR, PDMS, TN Phase III-FS, TN Phase III -FM, TN Phase VI, TRADELINK, FOTS, TEPS, MCCI, WEBBOE, WMS			
Please specify system from the above list			
COMPANY DETAILS			
Account ID / Customer Code:			
Account Name /Company Name:			
Address:			
Tel:	Fax:	Email:	
ADDITIONAL USER (PLEASE ADD THE USER BELOW TO THE SYSTEM, WITH IMMEDIATE EFFECT)			
Username:		Job Title:	
User Signature:	Email:		
Please provide ONLY email address created for you by your employer. We strongly recommend that you do NOT provide email addresses used by a group, or created by yourself for your personal use, such as under Gmail, Yahoo, Hotmail, etc. Using your personal email presents security risks to the company/business information, and personal email accounts may not be covered by your company's security policies. I CERTIFY THAT ALL THE ABOVE INFORMATION GIVEN ARE CORRECT AND TRUE			
First Name: Official seal			
Last Name:		_	
Date:		_	
Signature:			
 Fees: Rs 400/additional Login ID exclusive of VAT. Up to 3 Login IDs will be provided free of charge. To be filled by the authorised signatories as per Subscriber Account Registration Form and returned to the Customer Service Department on customer.service@mns.mu 			
The signed form must not be dated more than 14 days.			
I have read and acknowledge the <u>Privacy Notice</u> and I understand that all personal data shall be collected and processed in accordance with the Data Protection Act 2017.			
MNS OFFICE USE			
User ID:			

Initial: _

Initial: _