

# WESTPORTS (ETP 3.0) USER REQUEST FORM



## INSTRUCTIONS

1. Please print out this form via <http://www.etp.westports.com.my> and complete in BLOCK LETTERS.
2. Send the completed form via email to [etp\\_registration@westports.com.my](mailto:etp_registration@westports.com.my)
3. For queries on ETP 3.0, please contact our e-Terminal Helpdesk at +60 (3) 3169 4085 or email [etp\\_support@westports.com.my](mailto:etp_support@westports.com.my)

## NATURE OF BUSINESS: Please tick (√) where applicable)

Shipping       Haulier       Forwarders       Customs       Depot   
 Consignee       Warehouse       Shipper       OGA

## COMPANY PARTICULARS

Company Name			
Company Address			
Business Registration No. (For Malaysia Only)			
Department			
Ledger Account		BF License (for e-Gate Pass)	
Telephone No.		Email	

## USER LIST

	User Details		Specify Username		Specify Access (for shpg & fwdg)	Specify Instruction	User Authorization	
	Name		Preferred Username (6 chars) <small>*specify for new request only</small>		<input type="checkbox"/> General Enquiry <input type="checkbox"/> e-Do <input type="checkbox"/> e-Submit <input type="checkbox"/> e-Billing <input type="checkbox"/> e-Booking <input type="checkbox"/> e-GatePass (fwdg only)	<input type="checkbox"/> To Create <input type="checkbox"/> To Delete <input type="checkbox"/> To Change <input type="checkbox"/> Reset Password <input type="checkbox"/> Unlock Acc <input type="checkbox"/> To Make Payment/FPX	Signature	Date
1	NRIC							
	Email		Username <small>*for existing user only</small>					
	Mobile No.							
	Name		Preferred Username (6 chars) <small>*specify for new request only</small>					
2	NRIC							
	Email		Username <small>*for existing user only</small>					
	Mobile No.							
	Name		Preferred Username (6 chars) <small>*specify for new request only</small>					
3	NRIC							
	Email		Username <small>*for existing user only</small>					
	Mobile No.							
	Name		Preferred Username (6 chars) <small>*specify for new request only</small>					
4	NRIC							
	Email		Username <small>*for existing user only</small>					
	Mobile No.							
	Name		Preferred Username (6 chars) <small>*specify for new request only</small>					
5	NRIC							
	Email		Username <small>*for existing user only</small>					
	Mobile No.							
	Name		Preferred Username (6 chars) <small>*specify for new request only</small>					

## REQUESTOR DETAILS

Name		Company Stamp <small>*mandatory</small>	
Designation			
Signature		Date	

## OTHER CHANGE/REQUEST

(Please specify)

*Important: By the signing above, we agree to be bound by the Terms and Conditions of Westports (e-Terminal Plus) which contains Disclaimer and Exclusion of Liability Provisions in favour of Westports Malaysia. Westports CSIT team shall process this application form and respond within (1) working day from date of receipt provided all information is complete and free from error.*