Guidelines for filling System Password Application Form

*This form(Form A) is **to be submitted by the appointed company admin only***

Page 1 (Company details)

1. Company Details

1 **Company Application Details** [Please tick the appropriate box]

☐ First Registration   ☐ Business Role Updates

☐ Others [Please specify] _____

2 **System Detail** [Please tick the appropriate box]

☐ JCTS ☐ VCS ☐ FZIPS ☐ MSS ☐ MPTS

☐ PTOS ☐ Others [Please specify_____]

3 **Company Details** [Custom License is mandatory for Shipping Agent or Forwarding Agent that require access to FZIPS system]

Company Name _____ ROC / SSM Reg No _____

Company Address _____ Postal Code _____

_____ Payer Account No. _____

Contact Person _____ *(Company Director or Head of Department)*

Designation _____ Email Address _____

Phone No _____ Fax No _____

Customs License (SHA) _____ Customs License (For FWD) _____

1. **Company Application details:**
   - ❖ For first company registration, please tick "First Registration"
   - ❖ For New User Registration, System update & Business roles update (e.g.: Forwarding agent, shipping agent, haulage), Please tick "Business Role Update"
   - ❖ For Others matters such as reset password or any others matter, please tick "Others" and specify your needs.

2. **System Details *(for company):***
   - ❖ Please tick your desired system
     - ➤ JCTS: Johor Container Terminal System *(eg: Container activities, Booking, Pre-advise)*
     - ➤ MPTS: Multi-Purpose Terminal System *(eg: Shipping Note, Delivery Order)*
     - ➤ FZIPS: FreeZone Information Processing *System (eg: Manifest, ZB Declaration)*
     - ➤ MSS: Marine Services System *(eg: Pilot booking, tug boat, Mooring, etc.)*
     - ➤ VCS: Vessel Clearance System *(eg: vessel schedule)*
     - ➤ PTOS: Port Terminal Operation System *(eg: Container/Cargo Activity)*

3. Company detail
   - ❖ Please fill in the following information of your company

Page 1 (Shipping Line Details)

1a. Shipping Line Details [Shipping Agent Only (if applicable)]

List all the shipping lines which your company represents. Please enclose copy of appointment letter from each shipping line that your company representing.

Shipping Line:		Vessel Operator	Container Operator
1.	_____	[ ]	[ ]
2.	_____	[ ]	[ ]
3.	_____	[ ]	[ ]

1. **Shipping Line Details:**   ❖ This section applicable to Shipping agent only. (*if applicable*)

Page 1 (For Office Use)

For Office Use [Johor Port Only]

Name	_____	Date/Time	_____
Action Taken	_____	Remarks	_____

1. **For office use:**   ❖ Please leave this section empty

❖ Only to be filled by ICT Department, Johor Port Berhad

[Note: If you apply for Company Administrator user, please assign appropriate person in-charge since he/she will be responsible in managing user registration and termination application for JPBI System of your company. Only **ONE** Company Administrator is allowed to be registered under your company]

(1)

User 1 [Please enclose copy of applicant NRIC]

User Application Details [please tick the appropriate box]

☐ New   ☐ Update User Profile

☐ Others [Please specify] _____

(2)

System Details [please tick the appropriate box]

☐ JCTS   ☐ VCS   ☐ FZIPS   ☐ MSS   ☐ MPTS

☐ PTOS   ☐ Others [Please specify_____

(3)

Name _____

Designation _____   NRIC _____

Mobile No. _____   Email _____

Tel No _____   Fax No _____

User Type   ☐ Company Admin   ☐ Normal User

User Role   ☐ Shipping Agent   ☐ Forwarding Agent   ☐ Shipper/Consignee   ☐ Haulage

☐ Free Zone Operator   ☐ Government Agency - Department [Please specify] _____

☐ Others [Please specify] _____

1. **User Application Detail:**
   - ❖ **New** – for new user
   - ❖ **Update User Profile** – To update user roles *(eg: additional system/additional roles)*
   - ❖ **Others** – for other matters *(eg: reset password, etc.)*
   - ❖ Please copy this page (page 3) if more than three users

2. **System Details** *(for user)*:
   - ❖ Please tick your desired system
     - ➢ JCTS: Johor Container Terminal System *(eg: Container activities, Booking, Pre-advise)*
     - ➢ MPTS: Multi-Purpose Terminal System *(eg: Shipping Note, Delivery Order)*
     - ➢ FZIPS: FreeZone Information Processing *System (eg: Manifest, ZB Declaration)*
     - ➢ MSS: Marine Services System *(eg: Pilot booking, tug boat, Mooring, etc.)*
     - ➢ VCS: Vessel Clearance System *(eg: vessel schedule)*
     - ➢ PTOS: Port Terminal Operation System *(eg: Container/Cargo Activity)*

3. **User Type:**
   - ❖ For first company registration, it is mandatory to appointed only **ONE** company administrator
   - ❖ Company admin will be responsible in managing user registration and user termination
   - ❖ Please tick normal user if your company already have company admin registered in JPBi System

1 **User 2** [Please enclose copy of applicant NRIC] **2**

User Application Details [please tick the appropriate box]

☐ New   ☐ Update User Profile

☐ Others [Please specify] _____

System Details [please tick the appropriate box]

☐ JCTS ☐ VCS ☐ FZIPS ☐ MSS ☐ MPTS

☐ PTOS ☐ Others [Please specify_____

Name	_____
Designation	_____ NRIC _____
Mobile No.	_____ Email _____
Tel No	_____ Fax No _____

User Role
☐ Shipping Agent   ☐ Forwarding Agent   ☐ Shipper/Consignee   ☐ Haulage
☐ Free Zone Operator   ☐ Government Agency - Department [Please specify] _____
☐ Others [Please specify] _____

1. **User Application Details:**
   - ❖ **New** – for new user
   - ❖ **Update User Profile** – To update user roles *(eg: additional system/additional roles)*
   - ❖ **Others** – for other matters *(eg: reset password, etc.)*

2. **System Details:**
   - ❖ Please tick your desired system
     - ➢ JCTS: Johor Container Terminal System *(eg: Container activities, Booking, Pre-advise)*
     - ➢ MPTS: Multi-Purpose Terminal System *(eg: Shipping Note, Delivery Order)*
     - ➢ FZIPS: FreeZone Information Processing *System (eg: Manifest, ZB Declaration)*
     - ➢ MSS: Marine Services System *(eg: Pilot booking, tug boat,*

Mooring, etc.)

> VCS: Vessel Clearance System *(eg: vessel schedule)*

> PTOS: Port Terminal Operation System *(eg: Container/Cargo Activity)*

Page 3 (Submitted by details)

I represent and warrant that all information given is true, correct and valid. Johor Port Berhad reserves the right to terminate the service at any time without making any refund or payment should any of the above information is found to be false, incorrect or invalid. By using this service, I hereby agree to be bound by the JPB's Systems Subscribers Terms and Conditions attached herein and the JPB Terms and Conditions of Business as may be amended from time to time. I admit that I will be responsible for the confidentiality of the password, user identification number or other security device assigned by JPB:

**Only Company Administrator/Director is allowed to sign off this section. Please note that incomplete form will not be accepted

Name   :

NRIC   :

Signature   :

Date   :

Company   :
Stamp

- ❖ This section is only **to be filled by the appointed company system administrator or company director only**

- ❖ Company stamp should be mandatory and confined in the prescribed box. Form without Company stamp will not be accepted

Enclosed Herewith :

☐ System Password Application Form (Completed)

☐ A copy of Form 9 or 13 (where applicable)

☐ Front page NRIC copy of Company Administrator

☐ Front page NRIC copy of New Registered User

☐ Front page NRIC copy of the authorized person to collect the Password Slip

☐ A copy of Custom License from Kastam Diraja Malaysia (For Shipping/Forwarding Agent Only)

☐ 'Lesen Pengendali' and 'Permit Perkhidmatan' from SPAD (For New Haulage Registration Only)

☐ A copy of appointment letter for Shipping Line stated in section 1a (where applicable)

☐ A copy of appointment letter from payer (where applicable)

☐ Others (Please specify): _____

1. **System Password Application checklist:**

   ❖ A copy of user NRIC is **compulsory**
   ❖ For new haulage kindly attached also 'Lesen Pengendali' and 'Permit Perkhidmatan' from SPAD and ensure your company already register GSM with Lembaga Pelabuhan Johor (LPJ)
   ❖ Attached also a copy of appointment letter from payer - if billing to another company or if payer is from different company *(for invoicing advice).*
   ❖ Please check that all the fields in the form are filled in and all necessary enclosures are attached before submission of the Form to ICT Office