



## **SD Online User Request Form**

<u>IMPORTANT</u>: Please email your completed form to marketing@sargent-disc.com. If you are using digital signatures please ensure to include the certificate of completion together with the completed user form. All fields with an asterisk\* must be completed in full.

All licids with a	masterisk mast be complet	cca III Iaiii			
User Information	on				
Existing User ID (if applicable)	NOTE: If User ID is left blank, a new ID will be created				
Full Name*		Addr	255*		
Mobile/Cell No.*		Addi	C33		
E-Mail address*		Coun	try*	Post Code*	
Payroll Informa	tion				
Company*	I require access to*:				
Production*	UK Pay scales Payrolls specified below:				
Payrolls					
 User Authorisa	 tion				
Signature*	Date*:	I have read, u	nderstood a	and agree to the terms & co	onditions below
to ensure that they keep	S: Sargent-Disc Ltd cannot be held responsible opasswords confidential and do not leave a coldite those services for which we have been contexternal third parties.	mputer unattended wh	nilst logged in. Y	our data is being collected for the sol	e purpose of enabling
Authorised Sigr	natory				
	y an existing authorised signatory	y. Authorisation	must be by	a different person from the	e user request.
Access authorised b	oy:				
Full name of Signatory*		S	igned on be	ehalf of company or produc	tion*:
Position*					
Email Address*					
Date*			Signature*		
Internal use only					
Authorised by		A	ctioned by		
	Date:		-		Date: