

Use this form to submit a request to PRAL-Data Centre for VPN remote access to FBR/PRAL Systems/Network

<b>A. Requested By (to be filled by Applicant)</b>					
Requested Date					
Organization	<input type="checkbox"/> PRAL <input type="checkbox"/> FBR <input type="checkbox"/> Customs <input type="checkbox"/> Bonded Carrier/Other				
Request For	<input type="checkbox"/> Self-capacity <input type="checkbox"/> On Behalf of _____ (Shared Use)				
Application Type	<input type="checkbox"/> New Account <input type="checkbox"/> Change in Access Type <input type="checkbox"/> Delete Account <input type="checkbox"/> Re-activation				
Access Duration	<input type="checkbox"/> Permanent <input type="checkbox"/> Temporary _____ days				
Employee #		VPN ID (only mandatory for Change Request)			
Employee Name					
Designation		Team/Project			
Official Email		Official Contact #			
Department		Mobile #			
Applicant Signature		Official Address			
<b>B. Technical Access Details (to be filled by Applicant)</b>					
Static IP (as provide by ISP)	<i>Mandatory for other than PRAL/FBR users</i>				
Purpose of account					
Environment (!)	<input type="checkbox"/> Test/Training <input type="checkbox"/> Production <input type="checkbox"/> Other ____				
Access To (!)	<input type="checkbox"/> Islamabad Data Centre <input type="checkbox"/> Karachi Data Centre				
Access From	<input type="checkbox"/> Internal/LAN <input type="checkbox"/> External/Public				
Access Level	<input type="checkbox"/> Intranet Applications(FBR) <input type="checkbox"/> RDP (PRAL)    Data <input type="checkbox"/> se(PRAL)				
<b>List of Servers, Application, URLs for which the access is required</b>					
Sr #	Project/A pp	Server Name/URL	IP	Port	Justification
1.					
2.					
3.					
<b>C. Management Approval (to be filled by Applicant)</b>					
<b>Reporting Manager/HoD</b>		<b>For FBR Officials Only</b>			
• Name _____		• Name _____			
• Designation _____		• Designation _____			
• Signature / Stamp _____		• Signature /Stamp _____			
(External Users: CEO/MD/GM)		(Director/Collector/Commissioner/ADC/DC/AC)			
<b>D. Verification &amp; Approval Work Flow (Official Use Only - To be filled by PRAL)</b>					
• <b>Verified By</b>	Manager (Hosting/Operations)				
• <b>Approved By</b>	Chief Manager (Hosting)				
• <b>Authorized By</b>	Chief Manager (Networks & Infra.)				
<b>E. VPN Account Information (To be filled by Data Centre Team)</b>					
VPN Device ID/Name	Sonic Wall	IP (Optional)			
Created By		Creation/Issue date			
Informed Date		Informed By (SMS/Email)			

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*Legend: (!) Mandatory for PRAL officials only*

## VPN User Agreement

I undersign hereby declare that:

1. The information provided above is correct.
2. The password provided will be kept safe and will not be shared with others.
3. I will not be part of any activity that will disclose any information about FBR/PRAL Network, Applications/Services that may result in breach of PRAL/FBR's facilities.
4. Will not use my VPN account to gain unauthorized access to other PRAL/FBR facilities.
5. I am responsible for the safety of my VPN password and computer used for accessing PRAL/FBR's VPN. If my password or my computer has been compromised, I will inform the VPN administrator immediately.
6. I agree to be bound by the FBR/PRAL Information Security rules and regulations including, but not limited to, its Acceptable Use Policy
7. I understand my responsibility to respect and maintain confidentiality of all information which I have access through my computer. I understand that my non-compliance with the terms and conditions of PRAL/FBR's VPN service may result in the deletion of my VPN account.

**Name**

**Signature**

**Date**

## Supervisor Acknowledgment

I acknowledge that the requesting user requires the type of access indicated in this form. I understand that providing remote access to remote users and devices exposes PRAL/FBR to certain security risks. As the immediate supervisor, I accept responsibility for monitoring the requesting user's compliance with the FBR rules and regulations including, but not limited to, its Acceptable Use Policy.

**Name**

**Signature**

**Date**

## Tips & Guidelines

- Maximum Password Age: 30 days,
- Minimum Password Length: 8 Characters.
- Idle Timeout: 00:15:00
- Maximum number of failed login attempts to lock out an account. 3.

## How to Submit

1. **Submit completed form with signatures to the following address:**

*Pakistan Revenue Automation (Pvt) Ltd (IR/RTO Users)  
PRAL – Head office, Software Technology Park-III, Plot No. 156,  
Service Road (North), Industrial Area, I-9/3, Islamabad. Pakistan*

**PRAL-Office, 9<sup>th</sup> Floor, Custom House, Karachi (CustomsUsers)**

Phone : 0323-5159219, 03218559389/03235159218 (ISB) and 03212438417 (KHI)

24/7 NOC numbers 0519212374 (ISB) & 02199214868/ 02199214976(customs KHI)

Email: [datacenter@pral.com.pk](mailto:datacenter@pral.com.pk) for (ISB) and [vpn.customs@pral.com.pk](mailto:vpn.customs@pral.com.pk) for (Customs)KHI

<http://www.pral.com.pk/downloads/VPNRequestForm.pdf>

2. **The respective Data Centre/VPN team will inform the account details to requester after creation/changes in VPN form**