



SAP CRM B2B Portal.

Access and Authorisation Form – External supplier

Name:		Telephone:	
Surname:		Fax:	
Access required:	Production (PCR)	<input checked="" type="checkbox"/> Integration (ICR)	Development (DCR)

Comments:

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Please note.

By signing this request form, you commit yourself to the following conditions:

- My password will be kept secret and not be shared or compromised in any way.
- My user-ID will only be used for official business purposes and not for any personal gain.

Request details:

	Agency Requestor	BMW Approval	Security Administrator
Signature			
Print name			
Contact number			
Date			

Please email completed form to Carmenn.Pienaar@bmw.co.za