

Department of Homeland Security U. S. Coast Guard CG PSC 7421 (Rev. 06/08)		T-PAX/WINIATS User Access Authorization & Approving Official (AO) Designation		
1. User's Name (Last, First, MI.) (Please print)		2. Rank/Rate:	3. Employee ID # (SSN if not USCG Employed)	
4. Official Duty Station & OPFAC		5. Area Code & Work Phone Number:		6. e-Mail address:
7. User Role Description (see instructions)(Include current roles, this authorization supersedes all of your previous authorizations): T-PAX (Travel Preparation & Examination System Permissions) <input type="checkbox"/> Create "Non-CG Employee" Self Service User Profile (CONTRACTORS ARE NOT ALLOWED TO COMPLETE TRAVEL CLAIMS NOR DO THEY HAVE ACCESS TO T-PAX) **Must fill out fields 1-6, 8-12 <input type="checkbox"/> T-PAX AO (Authorizing Official) Permissions <input type="checkbox"/> Date of Expiration:_____ (Enter a date if desired. 1-Year is recommend) <input type="checkbox"/> Advance Signature Proxy Permissions <input type="checkbox"/> Date of Expiration:_____			8. Home Address: Street Address, Apt #:	
			9. Home Address: City, State, Zip Code:	
			10. Check all that apply as well as status within branch: <input type="checkbox"/> CGES <input type="checkbox"/> USMC <input type="checkbox"/> Civilian DOD Employee <input type="checkbox"/> USCG AUX <input type="checkbox"/> USAF <input type="checkbox"/> Chaplain <input type="checkbox"/> USPHERS <input type="checkbox"/> USN <input type="checkbox"/> Active Duty <input type="checkbox"/> USA <input type="checkbox"/> Reserve Duty <input type="checkbox"/> Other:_____ (specify)	
			11. USCG Work Address: Street Address, Apt #:	
			12. USCG Work Address: City, State, Zip Code:	
Winlats Access Permissions (PSC TVL Only) <input type="checkbox"/> Examiner Permissions <input type="checkbox"/> Auditor Permissions <input type="checkbox"/> Distribution Permissions <input type="checkbox"/> System Administrative Restricted Permissions <input type="checkbox"/> System Admin Permissions (full) <input type="checkbox"/> Super User Permissions (system suppt users only)			Scope of Authorization <i>Subject to the limitations that follow, the user is authorized access to the computer systems identified above. This authorization contains no implied authorization to access any computer system of the United States Government not specifically identified herein. Authorization will be revoked upon separation, retirement, reassignment of duties, change of organization or when determined by the Information Systems Security Officer to be in the best interest of the Government.</i> WARNING: Only Authorized Users May Use These Systems. To protect these systems from unauthorized use and to ensure that these systems are functioning properly, system administrators monitor these systems. Individuals using these systems without authority, or in excess of their authority, are subject to having all of their activities on these systems monitored and recorded by system personnel. In the course of monitoring individuals improperly using these systems, or in the course of system maintenance, the activities of authorized users may also be monitored. Anyone using these systems expressly consents to such monitoring and is advised that if such monitoring reveals possible evidence of criminal activity, management may authorize system personnel to provide the evidence of such monitoring to law enforcement officials.	
Web/Image Now Access Permissions (PSC TVL Only) <input type="checkbox"/> Examiner Permissions (all travel folders) Exception: _____ <input type="checkbox"/> System Admin Permissions (all travel folders) <u>(JUMPS and Direct Access are separate permission forms that must be filled out separately.)</u>				
13. Cmd Designation (Signature & printed name, Rank, Title (CO/OIC, XO/XPO or HQ/CGPC/AREA/MLC/DIST Branch Chief) & Phone Number): I certify that the access I have authorized is based on an official need. I'm aware of the general functionality I have authorized and I'm aware of what this will allow this member to complete. This member has demonstrated that they are knowledgeable in the use of the program I've authorized and has my confidence that they will diligently make entries and if in doubt they will seek assistance. I also acknowledge that if I lose confidence in this member for any reason I have a responsibility to withdraw this authorization.				
Signature AND PRINTED or TYPED Name, Rank, Title (see instructions), Phone OPFAC				Date:
For User Reference Your T-PAX Profile should be updated within 05 business days from the date this form is received at PSC Travel. (Please ensure that it has been 05 days & that you have reviewed your T-PAX profile for status prior to contacting PSC-TVL for designation status.) • PSC-TVL WEBPAGE...http://www.uscg.mil/hq/cg1/psc/tvl.asp T-PAX Profiles must be set up with user's password and general information required prior to submitting request for permissions other than self service. Designation request without basic profile information already entered by traveler will not be updated by PSC.				
Acknowledgment: I understand that I am authorized to access the T-PAX/Winlats system and that accessing it for purposes beyond the Scope of Authorization is a violation of Federal law (18 U.S.C. 1030 et al). My password meets the DHS Information Systems Security requirements, and I may be held responsible for my inappropriate protection or sharing of my password. I understand that prior to entering any transactions into T-PAX/Winlats I must be knowledgeable on the validity of the entry, the impact of that entry within T-PAX/Winlats, and the impact on the member. Personal monetary liability, adverse personal evaluation, and or further administrative or disciplinary actions may result if I am found negligent in the performance of any of my duties assigned here in. <u>By signing the User Signature below, I certify that I have read and understand the Statements of Responsibility and Liability, located on page 2-3 of this document, for each of the permissions assigned above.</u>				
14. User's Signature:			Date:	
(For PSC Use Only)T-PAX/Winlats Access Systems Administrator & CS			Fax to: (785) 339-3775	
Operator ID (if not = to Emplid):	OPRCLASS:	T-PAX/Winlats System Administrator Signature:	Date:	
Revocation/Termination of Access Authority Complete this section when the user is reassigned, separates from the service/terminates employment or the access needs to be terminated for any other reason. Fax it to (785) 339-3775. DATE:_____ REASON:_____				
Command Signature (Print and Sign) _____				

CG PSC 7421/2 (Rev. 06/08) Instructions

- Fax the completed form to PSC at the number on the form ((785) 339-3775)
- Retain the original form in the unit's files until the member departs the unit.
- When the member departs the unit or access needs to be terminated for some other reason, have the user sign and date the *Revocation of Access Notice* section of the form. Fax the complete form to the PSC.
- T-PAX/WinIats termination should be part of your unit checkout process.

All T-PAX/WinIats System permissions:

Read and be familiar with:

- Contractor's T-PAX User Guide at PSC Website.....(<http://cgweb.psc.uscg.mil/travel/T-PAX/Webhelp/>)
- JFTR, Appendix O, Temporary Duty (TDY) Travel Entitlements (*Information Only*).....(<http://perdiem.hqda.pentagon.mil/perdiem/trvlregs.html>)
- CG Supplement to JFTR.....(http://www.uscg.mil/directives/cim/4000-4999/CIM_4600_17.pdf)
- Chapter 2, 3PM(<http://www.uscg.mil/hq/cg1/psc/3pm.asp>)
- Federal Travel Regulations (FTR) (<http://www.gsa.gov/Portal/gsa/ep/programView.do?pageTypeId=8199&channelId=-13342&programId=9654#Chapter%20300:%20Federal%20Travel%20Regulation%20-%20General>)
- The Coast Guard Freedom of Information (FOIA) And Privacy Acts Manual(http://www.uscg.mil/directives/cim/5000-5999/CIM_5260_3.pdf)

T-PAX Authorizing Official Statement of Responsibility and Liability:

- T-PAX AO Statement of Responsibility & Liability: AOs have the authority to review & approve travel payment transactions in T-PAX and therefore, shall become knowledgeable in the matters of document(s) being approved. T-PAX AO's have broad authority to determine when TDY travel is necessary to accomplish the unit's mission, authorize travel, obligate unit travel funds, approve trip arrangements & authorize travel expenses incurred in connection with the travel. T-PAX AOs shall ensure documents are carefully reviewed before approval and not signed only as a matter of formality. The T-PAX AO shall not compromise system integrity by revealing their personal passwords. The T-PAX AO is fully accountable to the Coast Guard and may be found liable for erroneous or improper payments. T-PAX AO designation is terminated with a permanent transfer, inter-unit transfer, or when deemed necessary by competent authority.

T-PAX Advance Signature Proxy Statement of Responsibility and Liability (SPO Designation):

- T-PAX AdvSigProxy Statement of Responsibility & Liability: AdvSigProxy have the authority to prepare Travel Advances on the member's behalf in T-PAX, electronically sign for the member and forward to the appropriate AO and therefore, shall become knowledgeable in the matters of document(s) being created. T-PAX AdvSigProxies have broad authority to processes advances in connection with the travel on behalf of any member within their area of responsibility (typically any unit that fall under the SPO). T-PAX AdvSigProxy shall ensure documents are carefully reviewed before forwarding to AO. The T-PAX AdvSigProxy shall not compromise system integrity by revealing their personal passwords or personal information contained within the T-PAX system. The T-PAX AdvSigProxy is fully accountable to the Coast Guard and may be found liable for erroneous or improper payments and may be held accountable for failure to follow the Privacy Act. T-PAX AdvSigProxy designation is terminated with a permanent transfer, inter-unit transfer, or when deemed necessary by competent authority. By my signature above I certify I understand and agree to this Statement of Responsibility and Liability.

T-PAX Customer Service Representative Statement of Responsibility and Liability:

- T-PAX CSR Statement of Responsibility & Liability: CSR have the authority to review all CG travel accounts in T-PAX, to assist members with questions, reset of passwords, and necessary instruction and therefore, shall become knowledgeable in the matters of travel regulations for both military and civilian personnel, privacy act regulations, and the operation of T-PAX. T-PAX CSR shall not compromise system integrity by revealing their personal passwords or personal information contained within the T-PAX system. The T-PAX CSR is fully accountable to the Coast Guard and may be held accountable for failure to follow the Privacy Act. T-PAX CSR designation is terminated with a permanent transfer, inter-unit transfer, or when deemed necessary by competent authority.

T-PAX System Administrator Statement of Responsibility and Liability:

- T-PAX SA Statement of Responsibility & Liability: T-PAX SA have the broad authority within T-PAX.....The T-PAX SA is fully accountable to the Coast Guard and may be found liable for erroneous or improper payments and may be held accountable for failure to follow the Privacy Act. T-PAX SA designation is terminated with a permanent transfer, inter-unit transfer, or when deemed necessary by competent authority.

WinIats Examiner Statement of Responsibility and Liability:

- An Examiner is the individual primarily responsible for the overall processing of travel payments

WinIats Auditor Statement of Responsibility and Liability:

- An Auditor is the individual responsible for reviewing travel claims that have been processed and are flagged for audit. When a claim has been flagged by IATS for audit, an individual with Auditor Function capabilities must access the flagged block and either review the flagged claim on-screen, or review a printed audit report. The Auditor must review every input screen for a claim flagged for audit.

WinIats Disbursing Statement of Responsibility and Liability:

- An individual with Disbursing capabilities is responsible for preparing a block of processed claims for payment. In addition, this individual must release the processed blocks and carries the same accountability as a PAO.

WinIats System Administrator (limited/full) Statement of Responsibility and Liability:

- The System Administrator is the individual responsible for the overall operation of IATS and controlling the work flow throughout the system. System Administrators are responsible for the set-up and configuration of IATS for the particular travel office. In addition, System Administrators perform the following additional functions: Performing system maintenance; Establishing user accounts; Assigning/re-assigning blocks and claims; Deleting completed blocks; Deleting un-needed traveler or travel order details; Debt management; Importing and updating system rates files; Processing interfaces between accounting, disbursing, and personnel systems; Generating management reports; Running utility programs.

WinIats SuperUser Statement of Responsibility and Liability:

- When user accounts are created by the System Administrator, a View mode must be established. The functions a user may perform are dependent upon the View mode associated with their user ID. The Super User View allows the user to switch between various View modes without logging out and logging back in with a different user ID. When the Super User logs-in initially, their View mode defaults to System Administrator.