

<b>U.S. Department of Homeland Security</b> U.S. Coast Guard CG-7421A (Rev. 02-10)		<b>T-PAX/WINIATS USER ACCESS AUTHORIZATION &amp; APPROVING OFFICIAL (AO) DESIGNATION</b>		
1. User's Name (Last, First, MI.) (Please print)		2. Rank/Rate:	3. Employee ID (SSN for non-employees)	
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): <b>T-PAX (Travel Preparation &amp; Examination System Permissions)</b> <input type="checkbox"/> T-PAX AO (Authorizing Official) Permissions <input type="checkbox"/> Date of Expiration: (Will automatically expire one year from date of command signature) <input type="checkbox"/> Advance Signature Proxy Permissions <input type="checkbox"/> Date of Expiration: (Will automatically expire one year from date of command signature) <input type="checkbox"/> <b>Create "Non-CG Employee" Self Service User Profile</b>		<b>Winlats Access Permissions (PPC TVL Only)</b> <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)		
		<b>Web/Image Now Access Permissions (PPC TVL Only)</b> <input type="checkbox"/> Examiner Permissions (all travel folders) Exception: <input type="checkbox"/> System Admin Permissions (all travel folders)		
Note: Contractors are not allowed to complete travel claims nor do they have access to T-PAX. <b>**Non-CG Employees Must fill out blocks 1-6, 8-12 and provide SSN in 3.</b>		<b>Revocation:</b> With the exception of non-employees, TPAX/WINIATS roles are automatically terminated upon PCS, separation, retirement, reassignment of duties (Fleet-Ups) and change of organization (inter-office transfer). AO, Advance Signature Proxy and Customer Service Representative Permissions automatically expire one year from the date of the command signature. Submit a new application, annually, to retain these permissions.  Users who have been reassigned (PCS, Change of Department IDs) will retain Self-Service access.  The user role termination process is kicked off by submission of a PCS departing endorsement. If the member submits a new access form, and it is processed by PPC before the SPO submits the PCS departing endorsement, the system will terminate the new access. Please be sure to submit transactions in a timely manner.  If Revocation is for a non-employee or is due to reasons other than those listed above contact PPC Customer Care via on-line trouble-ticket at <a href="http://www.uscg.mil/ppc/ccb">http://www.uscg.mil/ppc/ccb</a> or <a href="http://cgweb.ppc.uscg.mil/ccb/">http://cgweb.ppc.uscg.mil/ccb/</a> or via email at <a href="mailto:PPC-DG-CustomerCare@uscg.mil">PPC-DG-CustomerCare@uscg.mil</a>		
Blocks 8 to 12 required only for <b>Non-CG Employee</b> requests 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"/> USPHS <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  12. USCG Work Address: City, State, Zip Code				
<input type="checkbox"/> Customer Service Representative Permissions (PPC Only) <input type="checkbox"/> Date of Expiration: (Will automatically expire one year from date of command signature) <input type="checkbox"/> System Administrator (PPC TVL Only) <input type="checkbox"/> Date of Expiration:				
13. <b>CMD Designation (Signature &amp; printed name, Rank, Title (CO/OIC, XO/XPO or HQ/PSC/FORCEOM/OPCOM/DIST Branch Chief) &amp; Phone Number):</b> 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.				
				Date:
Signature <b>AND PRINTED or TYPED</b> Name,		Rank,	Title,	Phone                      OPFAC
<b>For User Reference</b> <b>Your T-PAX Profile should be updated within 05 business days from the date this form is received at PPC Travel.</b> 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 requests without basic profile information already entered by traveler will not be updated by PPC.				
<b>Acknowledgment:</b> I understand that I am authorized to access the TPAX/WINIATS 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) (Note: Refer to the Automated Information Systems (AIS) User Acknowledgement Form (CG-5500A), which is required for all U.S. Coast Guard AIS users, it contains the full Scope of Authorization and Acknowledgement.). <b>By signing the User Signature below, I certify that I have read and understand the Statements of Responsibility and Liability, located on page 2 of this document, for each of the permissions assigned above.</b>				
<b>Privacy Act Statement</b>				
<b>AUTHORITY:</b> Executive Order 10450, 9397; and Public Law 99-474, the Computer Fraud and Abuse Act. <b>PRINCIPAL PURPOSE:</b> To record names, signatures, and other identifiers for the purpose of identifying individuals requesting access to U. S. Coast Guard (USCG) systems and information. NOTE: Records may be maintained in both electronic and/or paper form. <b>ROUTINE USES:</b> None. <b>DISCLOSURE:</b> Disclosure of this information (including your SSN if not a member/employee of the USCG) is voluntary; however, failure to provide the requested information may impede, delay or prevent further processing of this request.				
14. User's Signature:		Date:		
(For PPC Use Only) T-PAX/Winlats Access Systems Administrator & CS			Fax to: (785) 339-3737	
Operator ID (if not = to Emplid):	OPRCLASS:	T-PAX/Winlats System Administrator Signature:		Date:

# CG-7421/2 (Rev. 02-10) Instructions

- Fax the completed form to PPC at the number on the form ((785) 339-3737)
- Retain the original form in the unit's files until the member departs the unit.
- **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 PPC Website (<http://www.uscg.mil/ppc/webtpax/index.htm>)
- JFTR, Temporary Duty (TDY) Travel Entitlements (<http://www.defensetravel.dod.mil/perdiem/trvregs.html>)
- CG Supplement to JFTR. ([http://www.uscg.mil/directives/cim/4000-4999/CIM\\_4600\\_17.pdf](http://www.uscg.mil/directives/cim/4000-4999/CIM_4600_17.pdf))
- Chapter 2, 3PM. (<http://www.uscg.mil/PPC/3pm.asp>)
- Federal Travel Regulations (FTR) (<http://www.gsa.gov/federaltravelregulation>)
- The Coast Guard Freedom of Information (FOIA) And Privacy Acts Manual ([http://www.uscg.mil/directives/cim/5000-5999/CIM\\_5260\\_3.pdf](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.

All AO permissions will automatically expire one year (1 year) from the date of command signature, when member changes OPFACs, separates from the CG or changes status (i.e. from active to reserve components).

## 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.

All AdvSigProxy permissions will automatically expire one year (1 year) from the date of command signature or when member changes OPFACs or separates from the CG or changes status (i.e. from active to reserve components).

## 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.

All Customer Service permissions will automatically expire one year (1 year) from the date of command signature or when member changes OPFACs or separates from the CG or changes status (i.e. from active to reserve components).

## 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.