

New User Account Form

DO NOT PRINT THIS FORM

Complete this form electronically then submit it via email to technicalsupport@ftlg.net

Today's Date:

Start Date:

Employee ID:

First Name:

Last Name:

Location:

Department:

Job Title:

Please provide the name of an existing employee whose permissions can be matched to this user:

Does this user require Verkada camera access? Yes No

-----TRAMS/Data Corp Access-----

Accounting: Yes No

If yes, choose access: Choose an item.

List company number(s): Click here to enter text.

Check box if user is A/R Rep	<input type="checkbox"/>
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Packaging: Choose an item.

	Standard	Railcars	Customers	Supplies
101 – Barbours Cut	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
102 – BCIP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
103 – LLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
124 – Leatherman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
130 – Bridge Port	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
140 – Bayport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
150 – Fort Worth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
170 – Tiger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
171 – Lion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
204 – Deer Park Junction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
401 – Seadrift	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

501 – Kilgore	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
601 – 225 Whse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
701 – Port Crossing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
706 – Buffalo Horn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
950 – Mission Rail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

-----Frontier Web Permissions-----

Additional Requests/Permissions:

This form must be filled out to its entirety, any mistakes and/or errors will only delay the process. The form will not be processed without proper approvals.