## **Structural Funds Database 2014-2020**

Information Management & Monitoring System



USER ACCOUN	NT APPLICATION F	ORM	Ref No	
User Level User already has an	Managing Authority Line Ministry OP I Beneficiary OP I Intermediate Body OPI  Yes Level		Horizontal Stakeholder Line Ministry OP II Beneficiary OP II Intermediate Boday OPII	
SFD14-20 Account	No	Select From Managing Ministry OP II, Benefic	g Authority, Horizontal Stakeholder, Line Minist iary OP I, Beneficiary OP II	ry OP I, Line
1.0 DETAILS				
1.1 Personal				
Surname and Name				
ID Card Number		UMS Login	corp\ Applicable only in the case of CORP	users
Designation (in relation to the Project)			, , , , , , , , , , , , , , , , , , , ,	
1.2 Organisation				
Organisation Name				
Organisation Address				
1.3 Contact Details				
e-Mail Address				
Telephone Number		Mobile Nu	mber	
**	European Structural and Inve Co-financing rate: 80% Europ Fund	ean Union; 20%		**

## 1.4 Declaration by the Applicant

I am hereby accepting responsibility to access the SFD 14-20 and to follow rules and obligations which arise from the use of this database. I am hereby agreeing to access this database solely to carry out my duties related to projects funded under Cohesion Policy 2014-2020. I declare that I will not divulge any information or details arising from the use of this system to other individuals or entities outside the organisation indicated above.

I, the undersigned, state that I will:

- a) Only certify payments for which I have the necessary authority (where applicable);
- b) Request termination of access rights when no longer needed or justified;
- c) Promptly report suspicious events that may bring prejudice to the security of the system;
- d) Not divulge my access details (username and password) to anyone, including higher or lower staff;
- e) Inform the SFD Systems Administrator in writing about any changes affecting myself in my role at the above office; and
- f) Take the necessary precautions in terms of data privacy protection as per National and Commission's Regulations.

I also state that the above data identifying me is accurate.

Signature of the Head of the Organisation

	Signature of the Appli		Date		
Signature of the Applicant		Sant.	Date		
order to prov Application F applicants ar including inte your prior per	de you with online access orm may not be copied by a to ensure that all informat roperability with European (	In form is held in accordance with the Data Protection Act. All "Pet to services for the management of Structural Funds in Malta and any means (except by the Applicant) and the original shall be kep ion within this application form is correct and complete. All provided from the same purposes than those indicated. All data is ke thout any notification.	d in line with EU Regulatior of in a secure area by the M ided data shall be used for se of managing Structural F	No. 1303/2013. This anaging Authority. All the purpose indicated unds in Malta. Unless	
2.0 EN	DODSEMENT I	BY THE HEAD OF THE ORGANISAT	TION .		
		thority the form is to be endorsed by the Head of Unit	-		
<ul> <li>In the case secretaries</li> <li>In all other</li> </ul>	y if the applicant is the er cases the form is to	the form is to be endorsed by the Director (Program Director (Programme Implementation) him/herself. be endorsed by the Head of the Organisation	cant) is provided acces	s to the Structural	
Rights Delete as applicable		Priority Axis/Axes/Project(s)  Applicable only in the case of the Managing  Authority	Editing Rights on Technical Assistance Applicable only in the case of the Managing Authority - Delete as applicable		
Viewing Only	Editing Rights		Yes	No	
Luill alaa natii	v the ICT Unit by ema	il in order to terminate the above access rights wher	n they are no longer re	quired or justified.	

This application form is to be submitted to the Desk Officer responsible for the Project within the Planning and Priorities Co-ordination Division, Triq il-Kukkanja, Santa Venera, SVR 1411, or as applicable. Upon creation of Account, an automated e-mail including the system's credentials will be sent to the Applicant.

Date

3.0 APPROVAL BY THE I	3.0 APPROVAL BY THE MANAGING AUTHORITY						
This Section does not apply in the case of th	e Managing Authority.						
3.1 Receipt (this sub-section applies in the car	se of Horizontal Stakeholders, Line Ministries	and Beneficiaries)					
Date received (by the Desk Officer)							
3.2 Approval (this sub- section only applies in t	he case of Beneficiaries)						
Application Yes No	Reason(s)						
3.3 Projects inserted in the system for which the User is to be given access  This sub-section only applies in the case of Beneficiaries. Applications for projects whose details are yet to be inserted in the system cannot be completed.							
Project Code(s)							
MA Officers (to be copied)							
Including names	of Desk Officer & Senior Manager						
Signature of the Head of the Unit	Name	Date					
4.0 PROCESSING BY TH	E ICT UNIT						
	Date	Signature					
Application Form Received On:							
Application Accepted Tick where applicable  Application No							
User Account Created on: Applicable only if the Application is accepted							
Reason(s) for Rejection Applicable only if the Application is rejected							
Additional Comments							