

Non-Financial Assets Management System							
NFAMS							
User Registration Form							
Name of the Institution							
Institution Category (✓)	<input type="checkbox"/>	Government Agency	<input type="checkbox"/>	Provincial Council & Local Government			
	<input type="checkbox"/>	Public Enterprise	<input type="checkbox"/>				
Employee Name (Mr/ Mrs/ Ms)							
Designation							
Official Address							
Tele No	Office		Mobile		WhatsApp		
NIC No.							
E-mail							
<i>Please put a (✓) in front of the relevant fields</i>							
User Role	Data Entry	<input type="checkbox"/>	Data Verification	<input type="checkbox"/>	Internal Auditor	<input type="checkbox"/>	Auditor
Assets to be assigned							
Vehicles							
Lands							
Buildings							
Structures							
Plant, Machinery & Equipment, Furniture & Office Equipment							
Signature of the Employee							
I certify that the aforementioned officer is employed for the above mentioned Institution and recommend that permission be granted for above mentioned Assets categories and the User Role to be performed in NFAMS.							
Name of the Head of the Institution (Mr/ Mrs/ Ms)							
Signature & Official Stamp of the Head of the Institution							
Date -							