## NATIONAL HIGHWAY AUTHORITY

## Admin Wing (MIS Section) REQUEST FOR ISSUANCE OF OFFICIAL LOGIN AND PASSWORD FOR E-BILLING

Name:		Father/E	Iusband Name	e:	
Designation:		BS	Wing:	Section:	
Project Name	<b>:</b>				
Nature of Appointment	Regular	Contract	Deputation	Daily Wages	Individual Consultant
	t change his/h rough E-mail/S	-	nmediately on	receipt of logi	n and password
<b>Declaration:</b> I hereby declaration	are that I will l	xeep the login	and password	for E-Billing o	confidential and
change the pa	assword from ti	me to time. I fi	urther declare	that I will info	rm MIS Section
NHA HQ in wi	ritten in case of	my resignation	n and retireme	nt/official disa	ssociation from
NHA to discor	ntinue the use	of login and p	assword. That	in case of my	transfer, I will
hand over my	login and pas	sword to incu	mbent official	and ensure th	at he/ she has
placed his ow	n password in	my presence.			
			Sign	nature:	
			Dat	ed:	
			CNI	C:	
				oile No	
			E-M	Iail:	
Recommenda	tion of Concern	ned Member			
Approval:					
1. Name o	of the approving	g Officer:			
2. Design	ation of the app	proving Officer	:		
	Date			Signature &	& Stamp
FOR USE OF	ISSUING AUT	HORITY			
1. Assig	ned Login:		2. C	reation Date:	
3. Issui	ng Officer Name:		Sign	nature of Issuing	Officer