Request for Administrative Rights

Date Click here to enter a date.

**Auditors Details**

**Firm Name:**  Click here to enter text.

**Auditors Name:** Click here to enter text.

**Contact number of auditor:** Click here to enter text.

**Email address of auditor:** Click here to enter text.

**Title:** Choose an item.

**Reason for Administrative Rights**

Click here to enter text.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Approver’s Details**

**Firm Name:** Click here to enter text.

**Approver’s Name:** Click here to enter text.

**Contact number of approver:** Click here to enter text.

**Email address of approver:** Click here to enter text.

**Title:** Choose an item.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Kindly send the form to casewareafrica.support@adaptit.com, once completed.**