

CLINICAL WASTE MANAGEMENT SYSTEM

ONLINE REGISTRATION

LAST UPDATED: 22 SEPTEMBER 2018



A Cenviro Company 

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CUSTOMER REGISTRATION

Customer Registration



Figure 1 – Home Page

The CWMS Customer Portal could be access through CENVIRO homepage. Located the Customer Support Menu which at left panel, click to access the page & click Online Registration button shown as below.

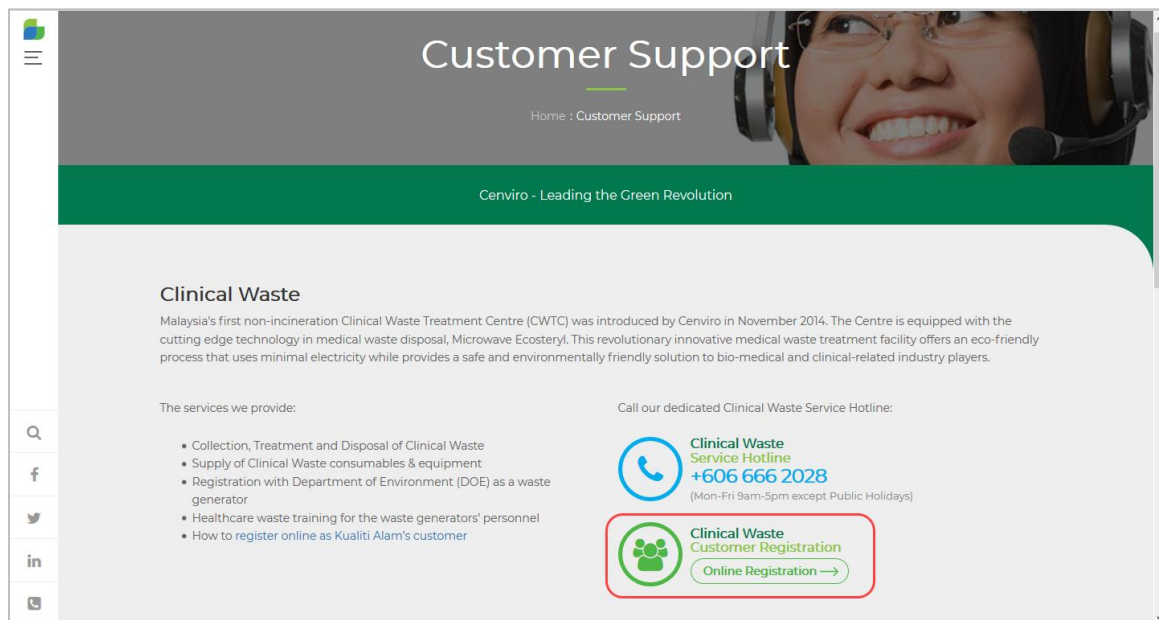


Figure 2 – Customer Support Page

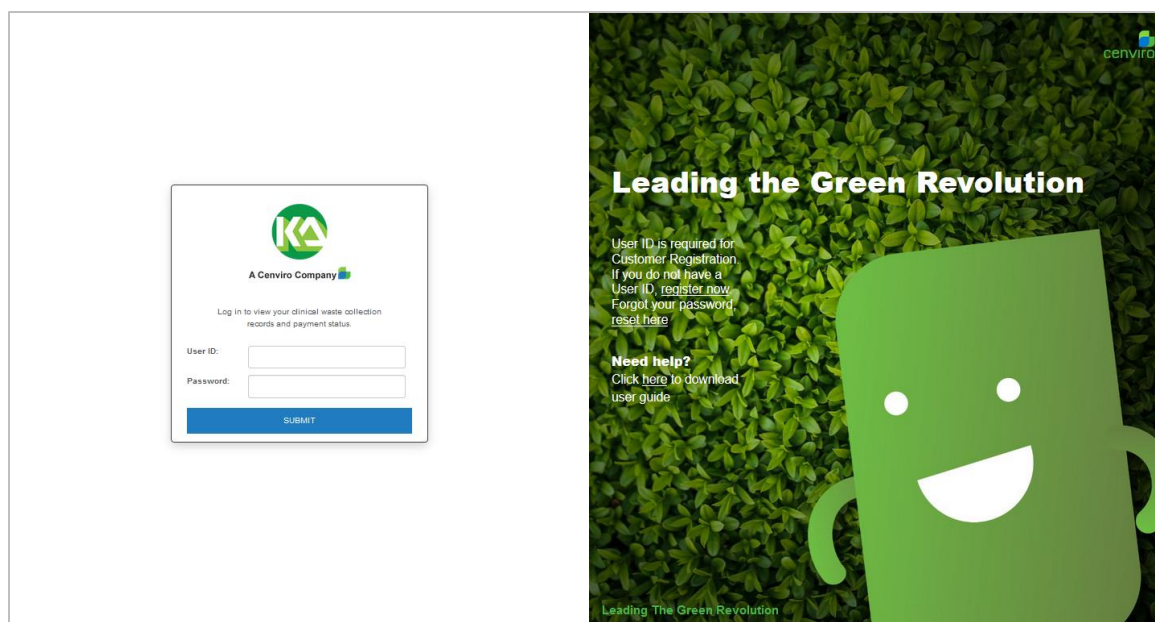



Figure 3 – CWMS Customer Portal

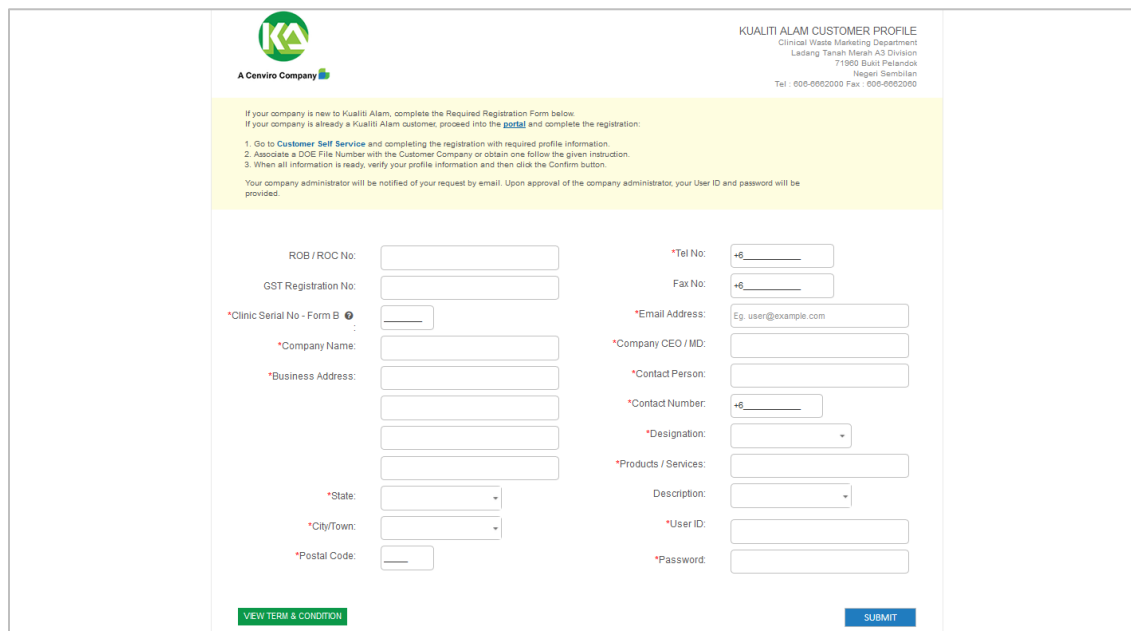
Click [Register Here](#) which located at the right panel of the Customer Portal page (refer to Figure 3)

User will be redirected to pre-registration page (Figure 4)

Figure 4 – Sample screen of Pre-Registration Page

Click **NEXT** to proceed as clinical waste customer registration. Complete the required Registration form which shown as below (Figure 5).

 **Note:** For scheduled waste, customer is required to download registration form and submit to KASB personnel.



The image shows a web-based registration form for Kualiti Alam. At the top left is the logo for 'A Cenviro Company'. At the top right is the header 'KUALITI ALAM CUSTOMER PROFILE' with contact details for the Clinical Waste Marketing Department. Below the header is a yellow box containing instructions for new and existing customers. The main form area is divided into two columns of input fields. Fields with a red asterisk (*) are mandatory. At the bottom are two buttons: 'VIEW TERM & CONDITION' and 'SUBMIT'.

KUALITI ALAM CUSTOMER PROFILE
Clinical Waste Marketing Department
Ladang Tanah Merah A3 Division
71950 Bukit Pelandok
Negeri Sembilan
Tel : 606-6662000 Fax : 606-6662000


If your company is new to Kualiti Alam, complete the Required Registration Form below.
If your company is already a Kualiti Alam customer, proceed into the [portal](#) and complete the registration:

1. Go to **Customer Self Service** and completing the registration with required profile information.
2. Associate a DOE File Number with the Customer Company or obtain one follow the given instruction.
3. When all information is ready, verify your profile information and then click the Confirm button.

Your company administrator will be notified of your request by email. Upon approval of the company administrator, your User ID and password will be provided.

ROB / ROC No:

GST Registration No:

*Clinic Serial No - Form B :

*Company Name:

*Business Address:

*State:

*City/Town:

*Postal Code:

*Tel No:

Fax No:

*Email Address: (Eg. user@example.com)

*Company CEO / MD:

*Contact Person:

*Contact Number:

*Designation:

*Products / Services:

Description:


*User ID:

*Password:

[VIEW TERM & CONDITION](#) [SUBMIT](#)

Figure 5 – Sample screen of Registration Page

The step of Customer Pre-Registration as below:

 **Note:** Please note that the red asterisk * indicates that this field **MUST BE KEYED-IN**

1. Fill in **ROB / ROC No.** (optional)
2. Fill in **GST Registration No.** (optional)
3. Fill in **Clinic Serial No. – Form B.**
4. Fill in **Company Name.**
5. Fill in **Business Address.**
6. Select **State.**
7. Fill in **Postal Code.**
8. Fill in **Tel No.**
9. Fill in **Fax No.** (optional)
10. Fill in **Email Address.**
11. Fill in **Company CEO/MD**
12. Fill in **Contact Person**
13. Fill in **Contact Number.**
14. Select **Designation**
15. Fill in **Product/Services**
16. Tick **Descriptions** (optional)
17. Create own preferred **Used ID**

18. Create own preferred **Password**

19. Click **Confirm**

Before customer fills and submit the required data for registration, Term & Condition is available to view.

 **Note:** Click **VIEW TERM & CONDITION** to view.

Sample of Clinic Serial No. No. Siri: 004612

BORANG B
[Subperaturan 3(4)]

AKTA KEMUDAHAN DAN PERKHIDMATAN JAGAAN KESIHATAN SWASTA 1998
PERATURAN-PERATURAN KEMUDAHAN DAN PERKHIDMATAN JAGAAN KESIHATAN SWASTA
(KLINIK PERUBATAN SWASTA ATAU KLINIK PERGIGIAN SWASTA) 2008

**PERAKUAN UNTUK MENUBUHKAN ATAU MENYENGGARAKAN ATAU
MENGENDALIKAN ATAU MENYEDIAKAN KLINIK PERUBATAN SWASTA**

NO. PENDAFTARAN: [REDACTED]

Diperakui bahawa: [REDACTED]
(Pemegang perakuan pendaftaran)

dengan ini didaftarkan untuk menubuhkan atau menyenggarakan atau mengendalikan atau menyediakan klinik perubatan swasta yang "dikenali/akan dikenali sebagai: [REDACTED] yang terletak di: [REDACTED]

di bawah terma-terma dan syarat-syarat sebagaimana yang dilampirkan mengikut peruntukan Akta Kemudahan dan Perkhidmatan Jagaan Kesihatan Swasta 1998 dari 12 SEPTEMBER 2007

No. KPPN pemegang perakuan pendaftaran: [REDACTED]
Alamat pemegang perakuan pendaftaran: ALAMAT SEPERTI DI ATAS

Jenis usaha niaga: TUAN PUNYA TUNGGAL
Alamat usaha niaga: ALAMAT SEPERTI DI ATAS

Nama orang yang bertanggungjawab: [REDACTED]
Kelayakan orang yang bertanggungjawab: MD (UKM)
Fi yang dibayar: RM [REDACTED] (Ringgit Malaysia [REDACTED])
Terma atau syarat: [REDACTED]

Perakuan pendaftaran ini tidak sah tanpa meterai dicetak timbul Kementerian Kesihatan, Malaysia

(Tan Sri Datuk Dr. Hj. Mohd Ismail bin Marican)
Ketua Pengarah Kesihatan, Malaysia
Tarikh: 12 SEPTEMBER 2007



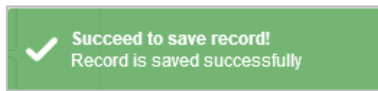
Catatan: *Potong mana-mana yang tidak berkenaan


Figure 6 – Sample of Form B

Next, user will able to see the company profile (Figure 7). User could change the contact detail if required.

Once completed reviewing, click  to save the information and a successful message will be

shown on the top right of the page.



Click  to proceed to next step.





Company Profile 	Terms & Conditions 	Waste Description 	Treatment Fees
<p>*ROB / ROC No: <input type="text" value="LPL0998"/></p> <p>*GST Registration No: <input type="text" value="0998"/></p> <p>*Clinic Serial No - Form B  : <input type="text" value="N/A"/></p> <p>*Company Name: <input type="text" value="Klinik Green"/></p> <p>*Billing Address: <input type="radio"/> Business Address <input type="radio"/> Collection Address</p> <p>*Business Address: <input type="text" value="Klinik Green"/> <input type="text"/> <input type="text"/></p> <p>*Postal Code: <input type="text" value="99999"/></p> <p>*State: <input type="text" value="NEGERI SEMBILAN"/></p> <p>*City/Town: <input type="text" value="DENGKIL"/></p>	<p><input type="checkbox"/> Same Information</p> <p>*Clinic Name: <input type="text" value="Klinik Green"/></p> <p>*Collection Address: <input type="text" value="Klinik Green"/> <input type="text"/> <input type="text"/></p> <p>*Postal Code: <input type="text" value="99999"/></p> <p>*State: <input type="text" value="NEGERI SEMBILAN"/></p> <p>*City/Town: <input type="text" value="DENGKIL"/></p> <p>*Tel No: <input type="text" value="+6019279201"/></p> <p>Fax No: <input type="text" value="+6"/></p> <p>*Email Address: <input type="text" value="green@green.com"/></p> <p>*Company CEO / MD: <input type="text" value="Dr. Green"/></p> <p>*Contact Person: <input type="text" value="Dr Green"/></p> <p>*NRIC No: <input type="text" value="983820839011"/></p> <p>*Designation: <input type="text" value="Asst. Manager"/></p> <p>*Products / Services: <input type="text" value="Clinic"/></p> <p>Industry Key: <input type="text" value="SMI"/></p>		

Figure 7 – Sample screen of Company Profile Tab


Company Profile 	Terms & Conditions	Waste Description	Treatment Fees
<p>to enforce such provision at a subsequent time.</p> <p>15.4 This Agreement shall be binding upon the successor on title, legal representatives and permitted assign of the parties hereto and shall be deemed a master agreement which terms and conditions shall be applicable to each and every consignment tendered by the Customer to KASB.</p> <p>15.5 No modification, amendment or waiver of any of the provisions of this Agreement shall be effective unless made by mutual consent and made in writing by way of supplementary agreement specifically referring to this Agreement and duly signed by the Parties. The provisions in respect of such amendment, variation or modification thereof shall be supplemental to and be read as integral part of this Agreement which shall remain in full force and effect as between both Parties.</p> <p>15.6 This Agreement contains the entire understanding between the Parties with respect to the subject matter hereof and supersedes and cancel all prior agreements, representations, acceptance, letter, negotiations, understandings, inducements or conditions, express or implied, oral or written, between the Parties with respect to or in connection with any of the matter or things to which this Agreement applies or refers.</p> <p>15.7 The Parties shall hold in strict confidence all information furnished by the other Party under this Agreement. Any such information shall not be disclosed to any third party without the prior written consent of the Party which had originally disclosed such information first being obtained, unless disclosure of such information is necessary for the proper discharge of either Parties' rights or obligations under this Agreement and in law.</p>			
<div> <input checked="" type="checkbox"/> I have read and accept the Terms & Conditions </div> <div>SAVE</div>			

Figure 8 – Sample screen of Term & Condition Tab

In the Term & Condition tab, user is recommended to read through the contents. Scroll to the bottom of the page, user is required to tick the checkbox in order to accept the Term & Condition (Figure 8).

☒ I have read and accept the Terms & Conditions

Click

SAVE

 and click


NEXT

 to proceed to next step.

Company Profile ✓	Terms & Conditions ✓	Waste Description ✓	Treatment Fees
Scheduled Waste Data			
No Item	Waste(1)		
1. Name of Waste*	<input type="text" value="Clinical Waste"/>		
2. Waste Origin / Source of Waste	<input type="text"/>		
3. Scheduled Waste Code*	<input type="text" value="SW404"/>		
4. Estimate Waste Quantity in Storage (kilogram)*	<input type="text" value="1.00"/>		
5. Estimated Quantity of Waste Generated (kilogram/month)	<input type="text" value="0.00"/>		
6. Description of Waste (eg.Liquid, Solid, semi Solid, Solvent Oil)	<input type="text" value="Refer to Annexure 1 Section 6"/>		
7. Properties of Waste ?	<input type="text"/>		
8. Chemical Certificate of Analysis from any accredited laboratory	<input type="text"/>		
		<input type="button" value="SAVE"/>	<input type="button" value="NEXT"/>

Figure 9 – Sample screen of Waste Description Tab

In the Waste Description tab, User is required to provide the waste information (Figure 9):

 **Note:** Please note that the red asterisk * indicates that this field **MUST BE KEYED-IN**

1. Fill in **Waste Origin/Source of Waste** (optional)
2. Fill in **Estimate Waste Quantity in Storage (kilogram)**
3. Fill in **Estimated Quantity of Waste Generated (kilogram/month)** (optional)
4. Select **Description of Waste (e.g. Liquid, Solid, Semi Solid, Solvent Oil)** (optional)
5. Fill in **Properties of Waste** (optional)
6. Fill in **Chemical Certificate of Analysis from any accredited laboratory** (optional)
7. Click
8. Click

Company Profile ✓
Terms & Conditions ✓
Waste Description ✓
Treatment Fees

Please fill Package Type: Package A

**** RM 10.00 surcharge will be imposed for clinical waste collected from Kelantan, Terengganu and Pahang (except Bentong, Raub, Mentakab and Temerloh).**

PACKAGE TYPE	COLLECTION (FREQUENCY)	TREATMENT & DISPOSAL FEE	COLLECTION PER TRIP	CONSUMABLE (INCLUSIVE)
Package A	Monthly	RM 2.90 per kg	RM 55.00	1 x SHARP CONTAINER 5L 10 x CABLE TIE 8' 10 x YELLOW BAG 700 X 700MM
Package B	Monthly	RM 2.90 per kg	RM 59.00	1 x SHARP CONTAINER 10L 10 x CABLE TIE 8' 10 x YELLOW BAG 700 X 700MM
Package B+	Monthly	RM 2.90 per kg	RM 69.00	1 x SHARP CONTAINER 20L 10 x CABLE TIE 8' 10 x YELLOW BAG 700 X 700MM
Package C	3 Months Once	RM 2.90 per kg	RM 89.00	1 x SHARP CONTAINER 10L 10 x CABLE TIE 8' 10 x YELLOW BAG 700 X 700MM
Package C+	3 Months Once	RM 2.90 per kg	RM 95.00	1 x SHARP CONTAINER 20L 10 x CABLE TIE 8' 10 x YELLOW BAG 700 X 700MM
Package D	On Call Basis	RM 2.90 per kg	RM 200.00	1 x SHARP CONTAINER 10L 10 x CABLE TIE 8' 10 x YELLOW BAG 700 X 700MM
Package E	Immediate	RM 2.90 to RM 3.40 per kg	F.O.C (at least 100.00 kg per collection/per week)	MGB BIN 240L (OTTO) YELLOW BIN (On loan basis)

☒ I have read and accept the Terms & Conditions

CONFIRM

Figure 9 – Sample screen of Treatment Fees Tab

In the Treatment Fee tab, user is required to make decision on the collection package type which provided by KA.

 **Note:** Select the unit of wheeled bin, if selected Package Type E.

Please fill Package Type: Package E
Unit of Wheeled Bin 5

Once completed the selection of package type, tick the checkbox at the bottom of the page and click

CONFIRM to confirm submission.

☒ I have read and accept the Terms & Conditions
CONFIRM

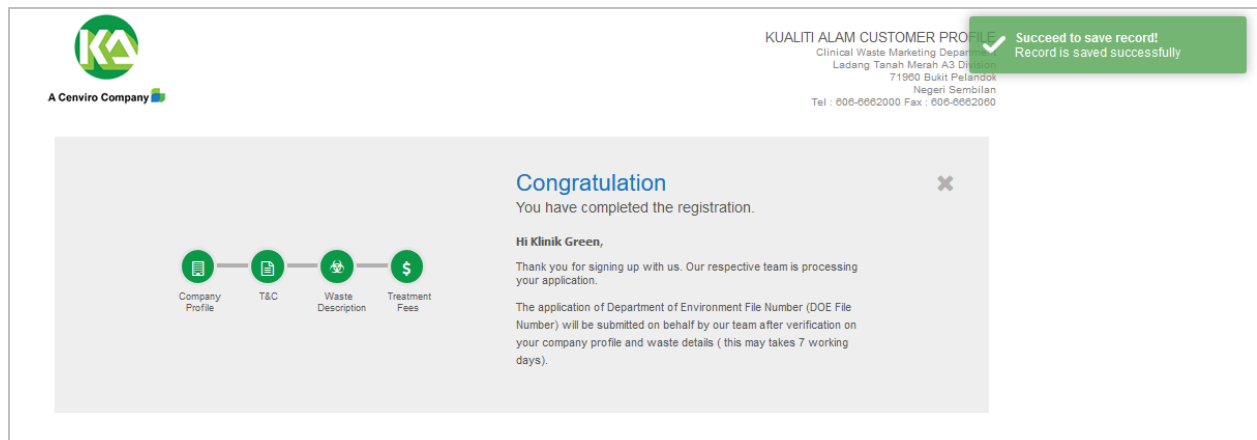
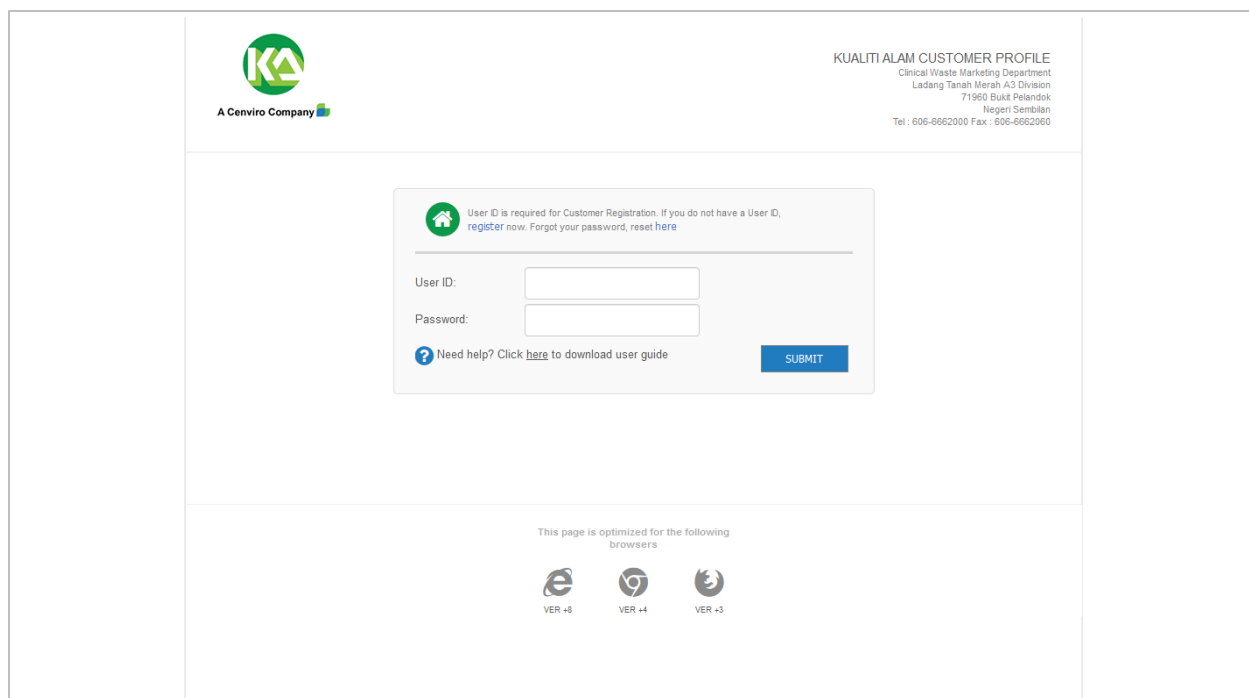


Figure 10 – Sample screen of Completed the Registration

Upon submission, a congratulation message will show and an email notification will be sent to respective team for approval.

PASSWORD RECOVERY

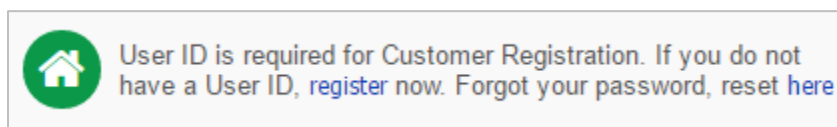
Password Recovery



The screenshot shows a web portal for KUALITI ALAM. The header includes the logo for 'A Cenviro Company' and the company name. The main content area features a registration form with fields for 'User ID' and 'Password', a 'SUBMIT' button, and a link to 'register now'. A message at the top of the form states: 'User ID is required for Customer Registration. If you do not have a User ID, register now. Forgot your password, reset here'. A footer section mentions browser optimization for Internet Explorer (VER +8), Google Chrome (VER +4), and Mozilla Firefox (VER +3).

Figure 11 – Sample screen of Portal Page

If user has lost their login password, self-service portal has offered the Password Recovery function.



A close-up of the message box from Figure 11. It contains a house icon and the text: 'User ID is required for Customer Registration. If you do not have a User ID, register now. Forgot your password, reset here'.

Go to the Self-Service Portal and locate the password recovery link. Click [here](#) and will be redirected to the password recovery page. Fill in either one of the criteria for verification, click [SEND EMAIL](#) (Figure 12).






 A Cenviro Company	KUALITI ALAM CUSTOMER PROFILE Clinical Waste Marketing Department Ladang Tanah Merah A3 Division 71900 Bukit Pelandok Negeri Sembilan Tel : 606-6662000 Fax : 606-6662000
	<div>  Note: Please key in your User ID and Email to reset your Password. If you do not have a User ID, register now. </div> <div> User ID: <input type="text"/> Email: <input type="text"/> <div>SEND EMAIL</div> </div>
This page is optimized for the following browsers <div>  VER +8  VER +4  VER +3 </div>	

Figure 12 – Sample screen of Password Recovery

Once the verification of login credential has been succeeded, a message will show as below (Figure 13). An email notification will send to the registered email address.







 A Cenviro Company	KUALITI ALAM CUSTOMER PROFILE Clinical Waste Marketing Department Ladang Tanah Merah A3 Division 71900 Bukit Pelandok Negeri Sembilan Tel : 606-6662000 Fax : 606-6662000
	<div>   </div> <div> Reset Password We have sent an email to lailynxxx@xxxil.com Please check your email to proceed Click here in order to redirect to home page. </div>
This page is optimized for the following browsers <div>  VER +8  VER +4  VER +3 </div>	

Figure 13 – Sample screen of Notification Password Recovery

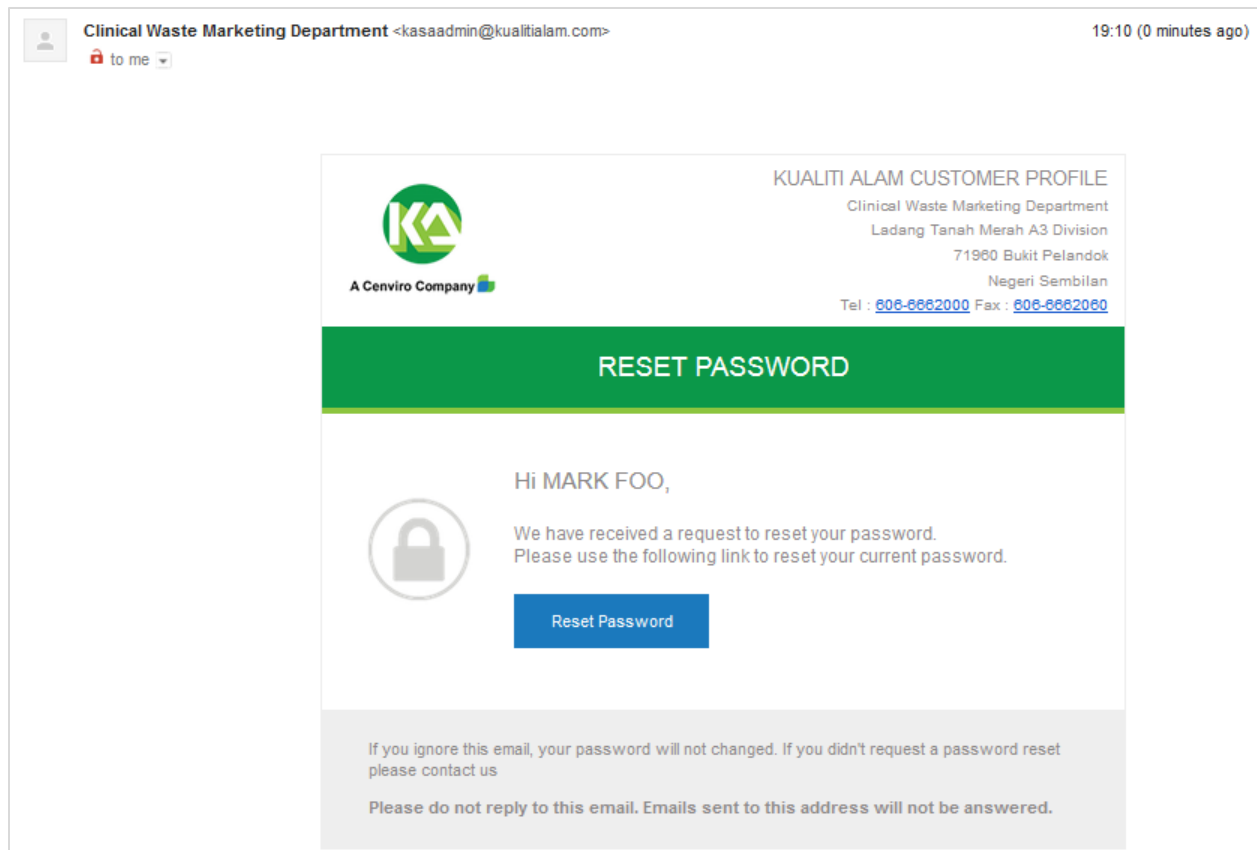



Figure 14 – Sample screen of Email Notification for Password Recovery

Login to the respective email account and locate the email sent from Clinical Waste Marketing

Department (Figure 14). Click  to redirect to New Password Set Up process (Figure 15).

 **Note:** Remember to check SPAM / JUNK folder if unable to find the email in your inbox.


	<div data-bbox="427 205 535 289">  A Cenviro Company </div> <div data-bbox="987 212 1190 296"> KUALITI ALAM CUSTOMER PROFILE Clinical Waste Marketing Department Ladang Tanah Merah A3 Division 71900 Bukit Palandok Negeri Sembilan Tel : 006-6662000 Fax : 006-6662060 </div> <div data-bbox="612 350 1018 552"> <div data-bbox="641 363 673 394"></div> <div data-bbox="678 363 857 394"> Note: Please key in your new Password. If you do not have a User ID register now. </div> <hr/> <div data-bbox="662 422 928 447"> New Password: <input type="password"/> </div> <div data-bbox="670 457 928 489"> Re-enter New Password: <input type="password"/> </div> <div data-bbox="885 510 966 531" style="background-color: #007bff; color: white; text-align: center; padding: 2px 10px; border: none; cursor: pointer;"> SUBMIT </div> </div>	
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Figure 15 – Sample screen of New Password Set Up

Set a new password and click SUBMIT. Successful message will show as below (Figure 16) and user could login to self-service portal using new password.


	<div data-bbox="427 1037 535 1121">  A Cenviro Company </div> <div data-bbox="987 1043 1190 1127"> KUALITI ALAM CUSTOMER PROFILE Clinical Waste Marketing Department Ladang Tanah Merah A3 Division 71900 Bukit Palandok Negeri Sembilan Tel : 006-6662000 Fax : 006-6662060 </div> <div data-bbox="612 1178 1018 1291"> <div data-bbox="641 1190 673 1222"></div> <div data-bbox="678 1190 898 1211"> Note: Information of successful password changing. </div> <hr/> <div data-bbox="641 1247 909 1268"> Your password has been changed. Click here to login </div> </div>	
--	--	--

Figure 16 – Sample screen of Successful New Password Set Up

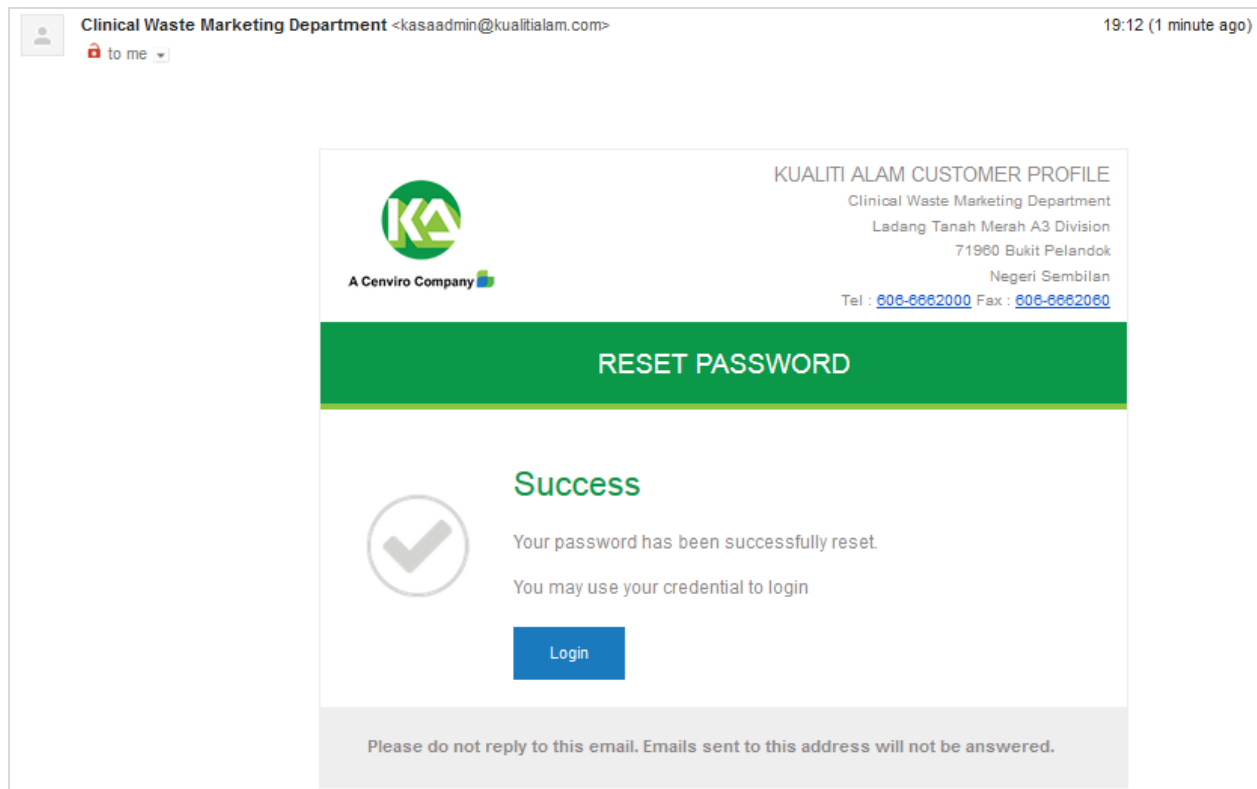


Figure 17 – Sample screen of Email Success Change Password

An email notification will send to the registered email address as an acknowledgment of password changed (Figure 17).