IT Installation/ Repair Request Form

	Date of Request
	2024-05-11

Local Supervisor/Manager	Japanese Department Manager
(signature)	*(signature)*

Name: GLADYS NIÑA SUGAROL

I.D No.: 10758

PC Name/No: TFXC0696

Div/Dep't: QA Division

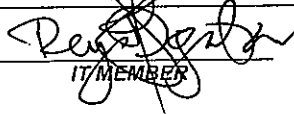| Type of Installation	☑ (Entry) (For Install)	☐ (Exit) (For Deletion)

☐ R-Pics System

☐ Cybozu/Garoon   ☐ Wireless Network

☐ E-Mail   ☐ LAN Cable Assembly/Installation

☐ Active Directory   ☐ PC Reformat

☐ Siam System   ☐ Documentum/Astrux System

☐ Data Surfing   ☐ Toss System

☐ Change of PC User   ☐ SAP
      previous user/I.D No.: _____   current user/I.D No.: _____

☐ File Server Drive
      (specify) _____ (purpose) _____

☐ Transfer of PC
      from dep't _____ to dep't _____

☐ Software
      (specify) _____ (purpose) _____

☑ Others   (specify) USB Access

☐ *Firewall Policy*
      (Select Policy Level Number) ( ) Select from 1, 2, 3, 4

      Reason for Application use in transfering Calsonic data, since server is not available

Policy Validity Period	Date From (yyyy/mm/dd)	Date To (yyyy/mm/dd)

Note: Do not fill-up Validity Period if Permanent

Requests Performed by:	*(signature)* IT MEMBER	2024-05-24 *Date and Time of Execution*

Document No.	TCF-G022	Ver.	3	TOYOFLEX CEBU CORPORATION		Retention Period
Effectivity Date	2021-04-15	Prepared by: SUSETTE SURBANO	Checked by: REY DAGATAN/AMADITO ORTIZANO	Approved by: TAKAFUMI MATSUNAGA		2 YEARS