

IT Installation/ Repair Request Form

Date of Request

2022-09-21

2022.9.21
DENNIS PINALES
SIGNATURE

Local Supervisor/Manager

2022.9.21
SIGNATURE

Japanese Department Manager

Name: JELYN CASUMPANG

I.D No. 011772

PC Name/No: TFXC0989

Div/Dep't: QA/QC PLM

Type of Installation

☒ (Entry)
(For Install) ☐ (Exit)
(For Deletion)

☐ R-Pics System

☐ Cybozu/Garoon

☒ E-Mail qa.plm.ph@toyoflex.com

☐ Active Directory

☐ Siam System

☐ Data Surfing

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

☒ File Server Drive QA/QC
(specify) CAIDS/CAIDS PLM (purpose) To access the CAIDS System.
CAIDS/CAST CHECKSHEET

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

☐ Software
(specify) _____ (purpose) _____

☒ Others (specify) Request for New laptop

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

Reason for Application _____

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: IT MEMBER Date and Time of Execution 2022-10-8

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