

IT Installation/ Repair Request Form

Date of Request

2023-03-25

[Signature]
HANS SANCHEZ
SIGNATURE

Local Supervisor/Manager

[Signature]
KOUJI SUGIMOTO
SIGNATURE

Japanese Department Manager

Name: APRIL ROSE SALGADOS

I.D No. 11985

PC Name/No: TFXC0934

Div/Dep't: WIRE ROPE / STRANDING

Type of Installation

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

☐ R-Pics System

☐ Cybozu/Garoon

☒ E-Mail

☐ Active Directory

☐ Siam System

☒ Data Surfing

☐ Change of PC User

previous user/I.D No.:

9366

current user/I.D No.:

11985

☐ File Server Drive

(specify)

(purpose)

☐ Transfer of PC

from dep't

to dep't

☐ Software

(specify)

(purpose)

☐ Others

(specify)

☐ Firewall Policy

(Select Policy Level Number) (3)

Select from 1, 2, 3, 4

Reason for Application

RETAIN ALL CURRENT ACCESS DURING TRANSFER

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

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