## IT Installation/ Repair Request Form

		Date of Request						
				NEST/IC CAPE SIGNATURE Local Supervisor/M	27	Ali di Sici	OLICE SA (O) LATURE Dartment Manager	
Name: BATINGAL, AUBREY KAYNE L.								
I.D No. 008805								
PC Name/No:								
Div/Dep't: DEVICE/PLM MOLD MAINT								
Type of Installation (Entry) (Exit) (For Install) (For Deletion)								
☐ R-Pics System								
	Cybozu/Garoon				] Wireless Ne	etwork		
Z	È-Mail				l LAN Cable	Assembly/Install	ation	
	☐ Active Directory				☐ PC Reformat			
	Siam System			☐ Documentum/Astrux System			1	
	Data Surfing		☐ Toss System					
☐ Change of PC User			□ SAP					
p <u>r</u>	previous user/l.D File Server Drive (spec		-W			DOCUMEN	<del></del>	
	Transfer of PC from (			*	dep't			
	Software (spec				pose)			
	Others (spec	cify) <u>USP</u>	YCCEC +	or keporting	byaboce2	and moni	toring	
☐ Firewall Policy (Select Policy Level Number) ( ) Select from 1, 2, 3, 4								
	Reason for Applica							
	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: USETTE SURYAND 2012-01-25  IT MEMBER Date and Time of Execution								
Document No.	TCF-G022	Ver. 3		TOYOFLEX CEBU	CORPORATION	1	Retention Period	
Effectivity Date	2021-04-15	Prepared by: SUSETTE SU		cked by: AGATAN/AMADITO ORTIZ/	Approved by: ANO TAKAF	FUMI MATSUNAGA	2 YEARS	