

IT Installation/ Repair Request Form

Date of Request
2023-03-24

HL
2023-03-24
HAZEL IAN FUERTES
SIGNATURE

Prepared By:

HL
2023-03-24
MCNEILANE MONTECILLO
SIGNATURE

Local Supervisor/Manager

LR
2023-03-25
LUI RESTAURIO
SIGNATURE

Japanese Department Manager

Name of User HAZEL LLEMIT

I.D No. 010466

PC Name/No: TXC1100

Div/Dep't: QA/QA

Position: WORKER II

Select the purpose of Application	<input checked="" type="checkbox"/> For New PC Issuance Request	<input type="checkbox"/> (For PC replacement request) <small>If you check here, attached the signed TFI-S15-G030 form</small>	<input type="checkbox"/> System Registration and Job Request
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(Systems Registration and Job Requests)

- | | |
|--|---|
| <input type="checkbox"/> Cybozu/Garoon | <input checked="" type="checkbox"/> Wireless Network |
| <input checked="" type="checkbox"/> E-Mail <u>lcmga.bio2.ph@toyoflex.com</u> | <input checked="" type="checkbox"/> LAN Cable Assembly/Installation |
| <input type="checkbox"/> Domain ID | <input checked="" type="checkbox"/> MS Teams Account |
| <input type="checkbox"/> PC Reset/Reformat | <input type="checkbox"/> Documentum/Astrux System |
| <input type="checkbox"/> SAP | <input type="checkbox"/> Toss System |
| <input type="checkbox"/> Change of PC User
previous user/I.D No.: _____ current user/I.D No.: _____ | |
| <input type="checkbox"/> File Server Drive
(specify) _____ (purpose) _____ | |
| <input type="checkbox"/> Transfer of PC
from dep't _____ to dep't _____ | |
| <input type="checkbox"/> Software
(specify) _____ (purpose) _____ | |
| <input type="checkbox"/> Others (specify) _____ | |

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

Reason for Application Additional laptop to be used by QA BIO workers

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: SHEILA MALINGIN
IT MEMBER

2023-07-14
Date and Time of Execution

Related Document: TCT-G007

Document No.	TCF-G022	Ver.	4	TOYOFLEX CEBU CORPORATION	Retention Period
Effectivity Date	2022-10-27	Prepared by:	REY DAGATAN	Checked by: AMADITO ORTIZANO Approved by: TAKAFUMI MATSUNAGA	2 YEARS