

IT Installation/ Repair Request Form

Date of Request
2022-09-28

2022.09.28
Lui Restauro
SIGNATURE
Local Supervisor/Manager

Hiroya Hamaguchi
Hiroya Hamaguchi
SIGNATURE
Japanese Department Manager

Name: Gymna Alipin
I.D No. 009399
PC Name/No: TFXC0981
Div/Dep't: QA

Type of Installation

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

- ☐ R-Pics System
- ☐ Cybozu/Garoon
- ☒ E-Mail qagroup.dcc3.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 (specify) Medical Factory (purpose) View important files necessary for DCC related documents
- ☐ Transfer of PC
from dep't _____ to dep't _____
- ☒ Software (specify) MS Office Tools (purpose) _____
- ☒ Others (specify) MS Teams
- ☒ Firewall Policy
(Select Policy Level Number) (2) Select from 1, 2, 3, 4

Reason for Application Additional MS Teams and Documentum Astrux System

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: PRIN HAROLD
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:	SUSETTE SURBANO	Checked by: REY DAGATAN/AMADITO ORTIZANO	Approved by: TAKAFUMI MATSUNAGA
					2 YEARS