IT Installation/ Repair Request Form

			2022-07-21	
			Amadro Orrizano SIGNATURE Local Supervisor/Manager Takaeumi Maysonaga SIGNATURE Japanese Department Manager	
Name:	Christopher	Alegre		
I.D No.	009536			
PC Name/No:	TFXC0584			
Div/Dep't:	GA/SAF			
Type of Installa		(Entry) (For Install)	(Exit)) (For Deletion)	
	R-Pics System			
	Cybozu/Garoon		☐ Wireless Network	
	E-Mail		☐ LAN Cable Assembly/Installation	
	Active Directory		☐ PC Reformat	
	Siam System		☐ Documentum/Astrux System	
	Data Surfing		☐ Toss System	
	Change of PC User previous user/l.D	No.:	Current user/I.D No.:	
	File Server Drive (spec	cify)	(purpose)	
	Transfer of PC from 6	dep't	to dep't	
	Software (spec	cify)	(purpose)	
	Others (spec	cify)		
	Firewall Policy (Select Policy Level Number) Select from 1, 2, 3, 4			
	Reason for Applica	tion Need	ed to acces internet for MicroSoft Teams meeting	
	Policy Validity Period Date		ate From (yyyy/mm/dd) Date To (yyyy/mm/dd)	
	Note: Do not fill-up Validity P	eriod if Permanent	t .	
	Requests Perform	ed by:	IT MEMBER Date and Time of Execution	
Document No.	TCF-G022	Ver. 3	3 TOYOFLEX CEBU CORPORATION Retention Period	
Effectivity Date	2021-04-15	Prepared by: SUSETTE SUF	Checked by: Approved by: 2 YEARS URBANO REY DAGATAN/AMADITO ORTIZANO TAKAFUMI MATSUNAGA 2 YEARS	