

# IT Installation/ Repair Request Form

Date of Request

2022-06-16

NOTE: NEED EMAIL FIRST  
BEFORE TEAMS

NOEL C. PADO  
SIGNATURE

Local Supervisor/Manager

Signature  
2022-06-16

Japanese Department Manager

Name: Delilah J. Bonone

I.D No. 0060916

PC Name/No: TEXC0549

Div/Dep't: PC - Warehouse

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.:

current user/I.D No.:

☐ File Server Drive

(specify)

(purpose)

☐ Transfer of PC

from dep't

to dep't

☐ Software

(specify)

(purpose)

☒ Others

(specify)

FOR SAP COMMUNICATION (Teams)

☐ Firewall Policy

(Select Policy Level Number) ( )

Select from 1, 2, 3, 4

Reason for Application

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:

NOEL C. PADO  
IT MEMBER

2022-06-16

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	