

IT Installation/ Repair Request Form

Date of Request

2022-11-24

2022-11-24
JMT *STANSON*
signature
Local Supervisor/Manager

2022-11-24
X. INABA
SIGNATURE
Japanese Department Manager

Name: NORMAN F. AURESTILAI.D No. 011645PC Name/No: TFXC 0994Div/Dept: PE-EQUIPMENT

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) TEAMS
- ☐ Wireless Network
- ☐ LAN Cable Assembly/Installation
- ☐ PC Reformat
- ☐ Documentum/Astrux System
- ☐ Toss System
- ☐ SAP

☐ Firewall Policy
(Select Policy Level Number) () Select from 1, 2, 3, 4

Reason for Application EAS-T COMMUNICATION

Policy Validity Period Date From (yyyy/mm/dd) _____ Date To (yyyy/mm/dd) _____

Notes: Do not fill-up Validity Period if Permanent

Requests Performed by:

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