

# IT Installation/ Repair Request Form

Date of Request

2023-01-26

2023-01-26  
SIGNATURE

Prepared By:

2023-01-26  
SIGNATURE

Local Supervisor/Manager

2023 01 26  
SIGNATURE

Japanese Department Manager

Name of User Lloyd Herman Oplado

I.D No. 11786

PC Name/No: TFXC1053

Div/Dep't: PR/SDGW ASSY

Position:

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 checked="" type="checkbox"/> System Registration and Job Request
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## (Systems Registration and Job Requests)

<input type="checkbox"/> Cybozu/Garoon	<input type="checkbox"/> Wireless Network
<input checked="" type="checkbox"/> E-Mail	<input 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 checked="" type="checkbox"/> File Server Drive (specify) Medical Group & Medical Factory (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) ( 2 ) Select from 1, 2, 2A, 3, 3A

Reason for Application For investigation and information of machines

Email: lloyd.oplado.ph@toyoflex.com

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: IT MEMBER 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:	Checked by:	Approved by:	2 YEARS
		REY DAGATAN	AMADITO ORTIZANO	TAKAFUMI MATSUNAGA	