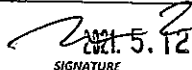


IT Installation/ Repair Request Form

Date of Request

2021-05-11 (2021-05-11)


 SIGNATURE
 Local Supervisor/Manager


 SIGNATURE
 Japanese Department Manager
Name: MANDUITA GALONI.D No. 5452PC Name/No: TFXC0692Div/Dep't: QA /QC T-ASSY

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)

 For Deletion: CHIDS / PLM / CAST
 For Install: CHIDS / PLM / CAST / T-ASSY / CHIDS
 (FULL CONTROL)

(purpose)

To access the CHIDS system for inspection & SID.

☐ Transfer of PC

from dep't

to dep't

☐ Software

(specify)

(purpose)

☐ Others

(specify)

☐ 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:


 SUSETTE SURBANO
 IT MEMBER

2021-05-11

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 DAGATANAMADITO ORTIZANO	TAKAFUMI MATSUNAGA	