



IT Installation/ Repair Request Form

Date of Request 2022-07-18			
 SHERWIN PALIQUIT SIGNATURE Local Supervisor/Manager		 AMADO ORTIZANO SIGNATURE Japanese Department Manager	
Name: Lucy L. Sales			
I.D No. 11232			
PC Name/No: TFXC0932			
Div/Dep't: GA-EMS			
Type of Installation <div style="display: flex; justify-content: space-around; font-size: small;"> <div> <input checked="" type="checkbox"/> (Entry) (For Install) </div> <div> <input type="checkbox"/> (Exit) (For Deletion) </div> </div>			
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> R-Pics System <input type="checkbox"/> Cybozu/Garoon <input type="checkbox"/> E-Mail <input type="checkbox"/> Active Directory <input type="checkbox"/> Siam System <input type="checkbox"/> Data Surfing <input type="checkbox"/> Change of PC User previous user/I.D No.: _____ current user/I.D No.: _____ </div> <div style="width: 50%;"> <input type="checkbox"/> Wireless Network <input type="checkbox"/> LAN Cable Assembly/Installation <input type="checkbox"/> PC Reformat <input type="checkbox"/> Documentum/Astrux System <input type="checkbox"/> Toss System <input type="checkbox"/> SAP </div> </div>			
<input checked="" type="checkbox"/> File Server Drive (specify) _____ PCO _____ (purpose) _____ to view files _____			
<input type="checkbox"/> Transfer of PC from dep't _____ to dep't _____			
<input type="checkbox"/> Software (specify) _____ (purpose) _____			
<input checked="" type="checkbox"/> Others (specify) <u>New Laptop</u>			
<input checked="" type="checkbox"/> Firewall Policy (Select Policy Level Number) (1 Select from 1, 2, 3, 4			
Reason for Application _____ Replacement of TFXC0818 (Hinay Laptop). ✓			
Policy Validity Period Date From (yyyy/mm/dd) Date To (yyyy/mm/dd) <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> <div style="border: 1px solid black; width: 150px; height: 20px;"></div> </div>			
Note: Do not fill-up Validity Period if Permanent			
Requests Performed by: <u>MILES VINCENT ARANAS</u> <u>2022-07-18</u> <div style="display: flex; justify-content: space-between;"> IT MEMBER Date and Time of Execution </div>			

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	