

ORIGINAL

AlloyMtd	AlloyMtd GROUP OF COMPANIES	DOC NO.	ISSUE: 2
		REV. DATE: 04 Sept 2013	REV. NO. 1
TITLE:	APPENDICES		

Appendix 1	Onsite/Offsite Storage Form
Appendix 2	Data Recovery Requisition Form

Date: _____

(Tick applicable)

Offsite Tape Storage
(From HQ to
Gombak Toll Plaza)

Onsite Tape Storage
(From Gombak Toll Plaza
to HQ)

Tape Details

[illegible]

Prepared by

Signature (Systems Administrator)

Date:

Acknowledged by

Signature (Transporter)

Name:

Date:

Notes

Acknowledgement

I hereby acknowledge that all tapes have been inspected and are without defect.

Signature _____

Name:

Date:

RIJALUDDIN SALLER

Executive Vice President, Head

Quality Technical Audit & Overseas Concessions Division

Data Recovery Requisition Form

Date: _____

Requestor (Tick applicable)

Full Name : _____
 Company Name : _____
 Department : _____
 Designation : _____

General

Mailbox	
Network Drive (H Drive)	
Network Drive (I Drive)	

Operating System /
Application Database

Exchange	
AD	
BOSS	
IFCA	
FACT	
ACCPAC	
Orisoft	
MBA	
Others**	

Justification

Signature (Applicant)

Date:

Recommended by

Signature (Immediate Supervisor)

Name:

Date:

Approved by

Signature (HOD)

Name:

Date:

Group IT Department Use

Approved / Not Approved

Signature (Head of IT Department)

Name:

Date:

Restored by

Signature (System Administrator)

Name:

Date:

Notes

Acknowledge Acceptance of Data

I hereby acknowledge that all data have been recovered accordingly.

Signature

Name:

Date: