



SMIC DATA CENTER - GATE PASS

Control No. _____

☐ TRANSFER FROM _____ DC to _____ DC ☐ DELIVERY ☐ PULL-OUT Date Filed: _____

Pulled-out equipment contains Data? YES / NO

Delivered/Pulled-out by: _____ Company: _____

Activity: _____ DC Location: _____

Equipment Owner: _____ Room: _____ Rack No.: _____

EQUIPMENT	SERIAL NO./FRU	QTY	REMARKS

Create attachment if more than 7 items

Released by: _____ Accepted by: _____
(Name and Signature) / Date (Name and Signature) / Date Mobile No.

Noted by: _____ Records updated by: _____
Immediate Head of Requestor (Name and Signature) / Date ITAM (Name and Signature) / Date

Approved by: _____ DC Guard: _____
DCF (Name and Signature) / Date (Name and Signature) / Date

SMIC, ITSS-DCFM

Data Center Gate Pass v4



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[Duplicate Copy]

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