



**REQUEST FORM
(ICT ITEM)**

Please tick (✓) at item below

FROM:

- | | | | |
|--------------------------------------|--|--|--|
| <input type="checkbox"/> Seremban | <input type="checkbox"/> Production | <input type="checkbox"/> Contract Management | <input type="checkbox"/> Planning&Development |
| <input type="checkbox"/> Jelebu | <input type="checkbox"/> Finance | <input type="checkbox"/> Customer Service&Public Affairs | <input type="checkbox"/> Mechanical&Electrical |
| <input type="checkbox"/> P.Dickson | <input type="checkbox"/> NRW/Telemetry | <input type="checkbox"/> Internal Audit | <input type="checkbox"/> Billing |
| <input type="checkbox"/> Jempol | <input type="checkbox"/> Special Project | <input type="checkbox"/> Enforcement | <input type="checkbox"/> Certification Agency |
| <input type="checkbox"/> Kuala Pilah | <input type="checkbox"/> HR | <input type="checkbox"/> Distribution | <input type="checkbox"/> Legal&Secretarial |
| <input type="checkbox"/> Rembau | <input type="checkbox"/> Water Quality | <input type="checkbox"/> Procurement | <input type="checkbox"/> Asset Management |
| <input type="checkbox"/> Tampin | <input type="checkbox"/> SHEQA | <input type="checkbox"/> Facilities | <input type="checkbox"/> Meter |

ITEM :

- Desktop Computer
- Laptop / Notebook
- Printer :
 - A4 Mono (Black/White)
 - A4 Colour
 - A3 Colour
 - Dot Matrix
- Fax Machine
- Photostat Machine
- Phone Set (PABX)

TONER / INK

SOFTWARE

- Microsoft Office
- Anti-Virus
- Others :

USERNAME / ID (for SYSTEMS) :

*Create / Delete

- | | |
|--------------------------------|--|
| <input type="checkbox"/> email | <input type="checkbox"/> iKaunter |
| <input type="checkbox"/> iWRS | <input type="checkbox"/> Servicedesk |
| <input type="checkbox"/> SAAB | <input type="checkbox"/> iCuti / iOffice |
| <input type="checkbox"/> iLoji | |

Remarks :

PERIPHERALS

- Thumb / Usb drive
- SD Card / Memory Card / DVD R
- Keyboard / Mouse
- Uninterruptible Power Supply (UPS)
- Others :

INTERNET / NETWORKING

- Internet Line (Streamyx)
- Broadband
- Networking / Cabling
- Access Point (Wifi)
- Wifi Dongle

REQUESTER DETAILS	
Name :	Employee ID :
Address (Location) :	Gred & Designation:
Job Function :	
SUBMITTED BY (REQUESTER)	HEAD OF DIVISION'S RECOMMENDATION (if Aplicable)
Signature : Name : Designation : Date :	Recommend <input type="checkbox"/> Yes <input type="checkbox"/> No Signature : Name : Date :
RECOMMENDATION (ICT)	APPROVAL (ICT)
Recommend <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Comments : Signature : Date :	Approval <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Comments : Signature : Date :