

DATA CENTER VISIT REQUEST FORM

**DATA CENTER ADDRESS: LEVEL 7, MENARA AIMS,
CHANGKAT RAJA CHULAN, 50200 KUALA LUMPUR**

VISITATION DETAIL

DATE:		(Mon-Fri only for normal/schedule maintenance)
TIME:		(9:30am-6:30pm only for normal/schedule maintenance)
PURPOSE:	TICK WHICH NECESSARY (**MAY TICK SEVERAL)	
	TOUR ONLY	<input type="checkbox"/>
	DEVICE/EQUIPMENT INSTALLATION	<input type="checkbox"/>
	DEVICE/EQUIPMENT REMOVAL ***	<input type="checkbox"/>
	HARDWARE/SOFTWARE MAINTENANCE	<input type="checkbox"/>
	HARDWARE/SOFTWARE TROUBLESHOOTING	<input type="checkbox"/>
	PASSING DEVICE/EQUIPMENT TO ENGINEER	<input type="checkbox"/>

ACCOUNT DETAIL

HOSTNAME:			
RACK:		IP:	

VISITOR / PERSONNEL DETAIL (MAX 5 VISITORS)

No	NAME	IC / PASSPORT	PHONE	VEHICLE PLAT NO.
1				
2				
3				
4				
5				

ACKNOWLEDGEMENT

By signing this form, you confirm that you understand agreed the information in this form are valid.

Client Signature
Name:

Date:

Time:

PERSON IN-CHARGE

Employee Name:

Date:

(AIMS) Visit ID:

Time:

CASE ID:

*** Any device / Equipment removal request will require 1 business day to process, subject to billing clearance.