

Date Raised :	19/09/2023
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* Please tick ☒ the relevant box.

PRIORITY

ORDER TYPE

☐	AOG	☒	Purchase	☐	Repair
☐	Rush Order	☐	Standard Exc.	☐	Overhaul
☐	Routine Order	☐	Others		

REQUESTOR DETAILS

1. Name MOHD FADZLIE ADAM	2. Position TOOL STORE SUPERVISOR	3. Dept. TOOL STORE	4. Base MIAT
5. Contact No. 017398 9835	6. Email Address fadzlieadam@galax vaerospace.my	7. Delivery Location MIAT STORE	8. Remarks (if any)

AIRCRAFT DETAILS * if requisition related to specific aircraft

A/C Reg.	N/A	Owner :	ALL BASE
:			
A/C Type	N/A	Location :	ALL BASE
:			
A/C Status	N/A	Worksheet :	N/A
:			
			

** Please state (N/A) if not applicable.*

VENDOR INFORMATION **if recommended by requestor*

Name of Company :

& Address

Contact No. :

Email Address :

Attn. :

DETAILS OF REQUISITION

[illegible]

Special Instruction :

ITEM URGENTLY NEEDED BY SHEET METAL

Please specify specifications/justifications/reason for the above request if required (attach separate sheet if space not sufficient)