

Property Removal Request
Form 1055

Date: _____

To: _____
(Dean/Dept.Head)

(School/Dept. Name)

Re: Removal of state owned property from premises.

_____ requests permission to remove state-owned
(Borrower)

property, inventory control number _____, described as

_____ from the University premises for legitimate

University business, which is _____
(Describe Business)

_____. The Equipment will be in

the custody of _____ From ____/____/____ until
(Date taken)

____/____/____, and will be located at _____
(Date returned)

during that time period.

Signed: _____

Department Name _____

Title _____