



## EQUIPMENT / FURNITURE TRANSFER / MOVE REQUEST

*Please send this form via Inter-office mail or fax @ 4598  
Penny Cordell – Purchasing*

Date of Request: \_\_\_\_\_ Permanent Move \_\_\_\_\_ Temporary Move \_\_\_\_\_

To be moved by: \_\_\_\_\_ Department \_\_\_\_\_ Plant \_\_\_\_\_ OCIS

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Current Location of equipment and/or furniture: \_\_\_\_\_

Asset/Decal tag #: \_\_\_\_\_ Serial #: \_\_\_\_\_

Specific Item(s) to be moved: \_\_\_\_\_

New Location of equipment and/or furniture: \_\_\_\_\_

Date/Time requested for completion: \_\_\_\_\_

Additional Information: approximate weight if known, door size, etc.) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Requester

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Department Head

\_\_\_\_\_  
Date