

EQUIPMENT RELOCATION/MOVEMENT FORM

Equipment:			
Model:			
Manufacturer:			
Serial #:	TAG #		
MOVE FROM CURRENT LOCATION Building / Floor / Room	MOVE TO NEW LOCATION Building / Floor / Room		
Old Custodian and Telephone Ext.	New Custodian and Telephone Ext.		
Reason for Relocation:			
Dept. Release Signature Date	Dept. Acceptance Signature Date		



EQUIPMENT RELOCATION FORM

EQUIPMENT RELOCATION ITEMIZED LIST

EQUIPMENT	MODEL	MANUFACTURER	SERIAL#	TAG / KIN #	FROM BLDG/ FLR/ROOM	TO BLDG/ FLR/ROOM