



REMOVE EQUIPMENT FROM CAMPUS REQUEST

This form is to be completed for any equipment that is removed from campus.

Department: _____

I, the undersigned, request authority to remove Lamar University property for the purpose of performing official business of the University relating to my duties as an employee. I understand that I assume responsibility for this equipment and if lost, damaged, or stolen, I shall be financially liable to the State for the loss thus sustained by the State. _____ (Please Initial)

I certify that the equipment will be taken to and remain at the following (if multiple locations, list home address):

Address: _____

City: _____ State: _____ Zip: _____

When on campus, the equipment is located at _____ building and _____ room number.

I will return the equipment by the date given here (date may not be later than August 31 of the current fiscal year), or I will obtain written approval for an extension at the end of the fiscal year using this same form.

Date of Return: August 31, _____

*When the equipment is returned, I will send a copy of this form along with a memo stating that the equipment has been returned and its current building and room number location on campus.

Lamar Tag #	Description	Serial Number	Acquisition Cost

Employee Signature: _____ ID #: _____

Printed Name: _____ Phone #: _____

Dept. Property Custodian Signature: _____ Date: _____

Printed Name: _____ Phone #: _____

If Department Property Custodian is the requestor, his or her immediate supervisor is required to sign the form.

If equipment is loaned to another agency, this form requires the President or Agency Head's approval of both agencies.

 Lamar University President's Signature (*Lending Agency*)

 President or Agency Head's Signature (*Receiving Agency*)

OFFICE USE ONLY BELOW THIS LINE

SPA SPREADSHEET Initials: _____ Date: _____ L DRIVE Initials: _____ Date: _____

Property Manager Signature: _____ Date: _____