



DEPARTMENTAL AUTHORIZATION FOR RECEIVING SURPLUS EQUIPMENT

TO: Property Management Warehouse Personnel

I hereby authorize the following named employee to select surplus property for:

Department Name: _____

Account Number: _____

Department Property Custodian: _____

Print Name

Email Address

Telephone Number: _____

Date: _____

Employee Needing Permission: _____

Print Name

Signature

Department Head: _____

Print Name

Signature

Approved by Property Management: _____

Signature

Name

Title