

## UNIVERSITY SURPLUS PICK-UP REQUEST

Requestor's Name	<b>.</b>	Department / Budget Unit		
Telephone #	Email	I	Date of Request/	
Type of Items (Check all that apply)	UAH Non-Equipment	UAH Equipment	UAH Furniture	
Primary location (	Building & Room Number) of items to	be picked-up:		
Best date to pick-up	o:/ Organization numb	per to credit proceeds of sa	ile of surplus property:	
Line #	Item Description		UAH Property Tag # (or serial number)	
1			(or serial flamber)	
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
<ul><li>Distribution:</li><li>It is the respon</li></ul>	Important Instru t be completed and properly authorized prior to Mail to Warehouse Operations, Central Receiv Retain one copy for your records. sibility of the requestor to properly label, tag, cla insported to Shipping and Receiving Surplus m	ring Building <b>Email</b> to cean, pack, and secure all item	y property. rb@uah.edu, or <b>Fax</b> to 7448 as to be picked-up.	
drop-off made t All materials sh	by the customer.  all be packed for storage in such a manner as t	to afford adequate protection	,, ,	
All materials sh	amage during transportation to Shipping and Re all be free from all residues of hazardous chem micals and substances, these items will NOT be the customer.	nicals and substances, and if t		
/	Authorized By:			
Do not write below this line Rev 4/2016				
WO Form Received:/				
CRB Pick-up Completed://				
	/ /			

\* (WO) Warehouse Operations

(CRB) Central Receiving Building

(IC) Inventory Control