

**CONCORD UNIVERSITY  
INVENTORY CONTROL**

**Request for Approval to move University-Owned  
Furniture and/or Equipment from One Location to Another**

Approval is requested hereby to move the following item (s) of furniture and/or equipment:

From: Bldg. \_\_\_\_\_ Dept. \_\_\_\_\_ Room # \_\_\_\_\_

To: Bldg. \_\_\_\_\_ Dept. \_\_\_\_\_ Room # \_\_\_\_\_

Purpose for the move of equipment:

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	<u>Item</u>	<u>Quantity</u>	<u>Inventory Tag No.</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Signature \_\_\_\_\_ Date: \_\_\_\_\_  
(Approval of Department Chairperson/Supervisor)

Signature \_\_\_\_\_ Date: \_\_\_\_\_  
(Physical Plant Employee or Inventory Control Clerk)

CC: Controller