

AUTHORITY TO RELEASE EQUIPMENT FOR REPAIRS

Department Name: _____

Tag Number: _____ **Description:** _____

Picked up for Repairs by:

- Maintenance Department
- Company Authorized to Repair Said Item
- Other (please state) _____

Authorized By:

Department Head: _____

Date: _____

Picked Up By:

Person's Name/Company: _____

Date: _____

Received After Repairs By:

Person's Name: _____

Date: _____

NOTE: PLEASE FORWARD A COPY OF THIS FORM TO THE PROPERTY CONTROL OFFICE.

This form will assist Responsible Person in tracking equipment sent for repairs.