

# Carnegie Mellon

## Property Accounting Services Department AUTHORIZATION FOR OFF-CAMPUS USE OF MOVABLE ASSETS

Dept No.	Dept. Name	Faculty/Staff User's Name	Campus Address Bldg. Room
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THE EQUIPMENT LISTED BELOW IS BEING USED FOR CMU-RELATED ACTIVITIES AT THE ADDRESS NOTED BELOW AND IS THE PROPERTY OF CMU, THE GOVERNMENT OR OTHER SPONSOR/AGENCY.

CMU Tag No.	Description	Model No.	Manufacturer	Serial No.

Complete address of equipment location:	Equipment User	Dept. Authorization
Name	Signature	Signature
Street	Date	Date
City State Zip		

SEND ONE COPY OF THIS FORM TO PROPERTY ACCOUNTING SERVICES, 407 S. CRAIG ST.