

## EQUIPMENT RELEASE FORM

AUTHORIZING TENANT (COMPANY NAME): \_\_\_\_\_

AUTHORIZED BY (NAME): \_\_\_\_\_

COLOCATION COMPANY: \_\_\_\_\_

EQUIPMENT REMOVAL BY (NAME): \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

BUILDING IDENTIFICATION CARD NUMBER: \_\_\_\_\_

**DESCRIPTION OF ITEMS BEING REMOVED**

DESCRIPTION	PART NUMBER & SERIAL NUMBER	
		PART #
	SERIAL #	
	PART #	
	SERIAL #	
	PART #	
	SERIAL #	
	PART #	
	SERIAL #	
	PART #	
	SERIAL #	
	PART #	
	SERIAL #	
	PART #	
	SERIAL #	

SIGNATURE : \_\_\_\_\_

LOADING DOCK            YES        NO

FRONT DOOR            YES        NO

DATE OF REMOVAL (MM/DD/YYYY): \_\_\_\_\_

TIME OF REMOVAL (HH:MM): \_\_\_\_\_

S/O NAME: \_\_\_\_\_