

CSUSB Property Action Request Form

Property Management Office
(909) 880-5147

Department _____ Date _____
 Contact Person _____ Phone _____
 Authorized Signature _____

PLEASE CHECK THE APPROPRIATE BOX(ES) BELOW FOR THE PROPERTY ACTION(S) REQUIRED

- " Change of Location/Intra-Department Fill in #1
- " Change of Location/Inter-Department Fill in #1,2
- " On-Campus Property Loan Request Fill in #1,3,4,7
- " On-Campus Property Use Request Fill in #1,5-8

1.

Current Location		Location Moved To		CSUSB Property #	Description
Dept.	Bldg/Rm	Dept.	Bldg/Rm		

- 2. Authorized Signature/New Dept.: _____
- 3. Property Being Loaned To: _____
- 4. Contact Person: _____
- 5. Where to be Used: _____
- 6. Statement of Use: _____
- 7. Date to be Returned: _____
- 8. The "Off-Campus Property Use Agreement" must also be completed and sent to Property Management.

PROPERTY MANAGEMENT USE ONLY

Date Requested _____ Inventory Data Correction Completed _____
 Date Returned _____ Date _____ Initial _____

Property Management Department Signature: _____