

ON CAMPUS ASSET/EQUIPMENT LOCATION CHANGE FORM

DESCRIPTION:	
TAG # (ASSET #):	
MANUFACTURER:	
MODEL:	SERIAL #:

FORMER LOCATION:

DEPARTMENT:	
BUILDING:	ROOM NUMBER:
DEPARTMENT HEAD:	
SIGNATURE OF DEPARTMENT HEAD:	

NEW LOCATION:

DEPARTMENT:	
BUILDING:	ROOM NUMBER:
DEPARTMENT HEAD:	
SIGNATURE OF DEPARTMENT HEAD:	

If moving more than one piece of equipment, please attach pages.

Please return completed form to: **Property Management, 25 Bedford Street, Portland, ME 04101**

(207) 780-5547

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