

## UNIVERSITY OF WEST FLORIDA UWF PROPERTY CHECK-OUT FORM

Cost \$5,000 or More

I request permission to remove UWF property from University premises for official use at off campus locations. This form must be completed, signed, and forwarded to the Property Department in the Controller's Office prior to removing any property from the University premises.

UWF Blue Tag #	Department #	Description			Serial #	
Date of Use (up to 2 years) From:			To:			
Purpose:						
	Typed Name of Requestor			Department Name		
damage or insurance	r loss to the property	y resulting from m ree to bring this p	y negligence property back	and not c	to reimburse UWF for any overed by the University's us for inventory purposes	
	Sigmature o	CD a consistion			Data	
Signature of Requestor					Date	
Approved:						
Signature, Department Head/Accountable Officer					Date	
	rtify that the above de satisfactory conditio	1	as been return	ed to the U	Iniversity premises and was	
Signature, Department Head/Accountable Officer				Date		