

AUTHORIZATION FOR EQUIPMENT CANNIBALIZATION

-	rty Control/Logistics Department re-Now	Date Date
	ed to request authorization to remove parts from an ob- 1. Complete this form and retain a copy for your recor 2. Submitthe completed form to Property Control. 3. A signed copy will be sent back to you with Propert	rd.
Cost Centers GT Tag: Justification		
Equipmer Part(s) wi		
Validation S Ido hereby co Signed: Approved By:	ertify that I approve of the disposal of equipment listed ab Property Coordinator's Name Da	ate
Cannibal Approved Denied	ization Determination - Reason Date	

INVENTORY FORM Please use continuation sheet to log the items removed the equipment.

GEORGIA INSTITUTE OF TECHNOLOGY EQUIPMENT CONTINUATION FORM

Property Control: Serivce-Now

Cost Centert#:	Cost Center.	Cost Center.Name:				
GT Tag:	Description:	Description:				
	Custodian's Name:					
Date Part Removed	Part	Description	Comment			
Validation Section						
	ave removed the above itertmental property coording		Jpon removal of all usable parts	, sign validation		
Signed: Date						
	Custodian's Signature					
For Logistics Use Only						
g,						