REQUEST FOR MOVING
FROM THE BUILDING MANAGER

Name of Building Manager: _________________________________  Today’s date: ____________

Name of Requestor (POC): _______________________________________

Phone Number for POC: _____________  Account Number: ______________

The Requestor must provide an account from which to pay the labor costs associated with the moves. Grounds will only move: the President’s podiums, the school flags, and trash cans. Furniture will not be moved.

Moves will be done Mondays through Fridays between 7:00 a.m. and 2:30 p.m. Moves for the weekend and holidays will be started on the last work day before the event. This is because of the limited access to the flags which are stored in Presidents Hall.

The date and time of the move will be coordinated between the POC and the Grounds Forman. There should be at least 7 days lead time from the date of the request to the preferred moving date. On the designated moving day, only those items specifically mentioned in the request will be moved.

Please ensure that all personnel involved in the move are aware of the date and time.

On the lines below; indicate what is to be moved and how many of each item:

________________________________________________________________________________________

FROM: Building:____________________  TO: Building:____________________
   Floor:   ______________________    Floor:____________________
   Room:   ______________________

If there is a special event requiring the move;
   Date and time of day the event will start: ______________________________
   Date and time of day the event will end: ______________________________

ONE MOVE PER REQUEST - FAX BACK TO EXT 9787

Please do not write below line
                                                                                   _______________________________________________________________________
Move Date:________________________________
Number of men:_________________________  Number of man-hours: ________
Date of Completion:______________________  Total Cost: ________________