TEN TWENTY
SPRING

PROPERTY REMOVAL FORM

Today's Date:

COMPANY NAME:

INDIVIDUAL REMOVING PROPERTY:

FLOOR/SUITE:

DRIVER'S LICENSE #:

DATE OF REMOVAL:

TYPE OF PROPERTY BEING REMOVED:

DESCRIPTION OF ITEMS:

SERIAL NUMBER: -

QUANTITY:

INDIVIDUAL REMOVING PROPERTY

DATE/TIME:

SECURITY OFFICER

DATE/TIME:

*** ALL INFORMATION ABOVE MUST BE COMPLETED TO REMOVE PROPERTY FROM 1020 SPRING.***