



**RENTAL EQUIPMENT REQUEST**  
(ONE ITEM PER FORM)

DATE: \_\_\_\_\_

REQUESTER: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

EQUIPMENT NEEDED: \_\_\_\_\_ MODEL NUMBER: \_\_\_\_\_

DATE NEEDED: \_\_\_\_\_ EXPECTED USAGE PERIOD: \_\_\_\_\_

VENDOR: \_\_\_\_\_ CONTACT: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

JUSTIFICATION: \_\_\_\_\_

COST PER: HOUR \_\_\_\_\_ DAY \_\_\_\_\_ WEEK \_\_\_\_\_ MONTH \_\_\_\_\_

MANAGER APPROVAL: \_\_\_\_\_ : \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PURCHASING USE ONLY**

P.O. NUMBER: \_\_\_\_\_ ORDER NUMBER: \_\_\_\_\_ CHARGE CODE: \_\_\_\_\_

DELIVERY DATE: \_\_\_\_\_ INSPECTION DATE: \_\_\_\_\_ SERIAL NUMBER: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PURCHASING SIGNATURE: \_\_\_\_\_

OUT OF SERVICE DATE: \_\_\_\_\_ RETURN DATE: \_\_\_\_\_