

# ON-CAMPUS PROPERTY RELOCATION FORM

Phone: (646)660-6543 Fax: (646) 660-6541  
Email: [Property.Management@baruch.cuny.edu](mailto:Property.Management@baruch.cuny.edu)

Send a copy of the completed form to the Property Coordinator

Department	Date	Description	Manufacturer	Model #	Serial #	Bar Code	PO#	From <small>Building &amp; Room</small>	To <small>Building &amp; Room</small>

**Department Liaison:** \_\_\_\_\_  
**BCTC Signature:** \_\_\_\_\_  
**Property Coordinator Signature:** \_\_\_\_\_

**Moved By (Tech Name):** \_\_\_\_\_  
**Public Safety Officer (Exiting Building):** \_\_\_\_\_  
**Public Safety Officer (Entering Building):** \_\_\_\_\_