

## CREATE NTU-HUJ Laboratory Equipment Transportation Form

### CREATE Laboratory

Requested by Name: \_\_\_\_\_ Contact number: \_\_\_\_\_ Date: \_\_\_\_\_

Reason: \_\_\_\_\_ From (lab): \_\_\_\_\_

Eqpt In-charge Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_ Sign: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Name: \_\_\_\_\_ (Manager/ Prof) Sign: \_\_\_\_\_ Date: \_\_\_\_\_

### Shipping NTU/ NUS/ Vendor

Ship by Contact Name \_\_\_\_\_ Contact number: \_\_\_\_\_ Sign: \_\_\_\_\_ Date: \_\_\_\_\_

Ship to Address: \_\_\_\_\_

#### Receiver

Received By \_\_\_\_\_ Contact number: \_\_\_\_\_ Sign: \_\_\_\_\_ Date: \_\_\_\_\_

Est. return date: \_\_\_\_\_ Actual Date: \_\_\_\_\_

ITEM	Description	Asset number/	Serial number	Quantity	Remark

CC: Shipping Company, Requestor, Receiver, Safety Officer

