



STYROTECH CORPORATION

IT Equipment Request Form

Name of Requestor: _____ Position: _____ Department: _____

User's Name: _____ Position: _____ Date: _____

EQUIPMENT REQUIRED:

ITD-FM-001 rev.02 073025

√	ITEM DESCRIPTION	QTY	INV	PROPOSED SPECS	PURPOSE				
	Laptop								
	Desktop Computer Set								
Software/System required to be installed <i>(indicate ver if possible):</i>									
Other Equipment <i>(Pls. specify including the specs.)</i>									
√	ITEM DESCRIPTION	QTY	INV	PURPOSE	√	ITEM DESCRIPTION	QTY	INV	PURPOSE
	Monitor					UPS			
	Keyboard					Printer			
	Mouse					Other Acc: <i>(Pls. specify)</i>			

Reason for Equipment Request:			Date Required:
Signature of Requestor	Signature of Approver	Comment:	

IT DEPARTMENT SECTION:

Date/Time Received	Received by
Checked and Endorsed by	Approve by IT Manager
Comment:	