



STYROTECH CORPORATION

IT Equipment Request Form

Name of Requestor: _____ Position: _____ Department: _____

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

EQUIPMENT REQUIRED:

ITD-FM-001 rev.02 073025

V	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>)																	
V	ITEM DESCRIPTION	QTY	INV	PURPOSE		V	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

IT DEPARTMENT SECTION:

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