

## Tool Moving Request Form

Faculty of Agro-Industry, King Mongkut's Institute of Technology Ladkrabang

Date ..... Month ..... Year .....

I am Mr./Mrs./Miss ..... Year ..... Subject field

..... would like to move ..... model/durable goods no.

..... from ..... to ..... for .....

between date ..... time ..... to ..... time .....

and I take full responsibility for all damages from moving / using the tool.

(Signature) ..... Requester

Date .....

<input type="checkbox"/> Acknowledge  (Signature) ..... Adviser	<input type="checkbox"/> Agree to move <input type="checkbox"/> Do not agree to move because ..... (Signature) ..... Scientist
<b>Remark</b> 1. Please check tool conditions before moving 2. Borrow / move no more than 3 days 3. Submit the form 1 day during office hours in advance	<input type="checkbox"/> Accepted  (Signature) ..... Lab Staff

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