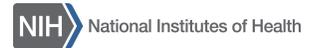




NBS Personal Property



NBS Personal Property: Property Reinstatement Request Form

AUTHORIZED REQUESTOR'S CERTIFICATION

By Submitting this request form, I **certify that:**

I am an IC Property Accountability Officer (ICPAO) or IC Property Custodial Officer (ICPCO) authorized to request reinstatement of the asset documented on this form.

Requestor's Information

ICPAO

ICPCO

Name		IC
Phone Number	Custodial Code	
E-Mail Address		Date Submitted

Asset Details

Decal Number	Model Number	Serial Number		
Manufacturer				
Initial Event Code A10 <input type="checkbox"/> A15 <input type="checkbox"/> Other <input type="checkbox"/>		Capital Asset <input type="checkbox"/>	Non Capital Asset <input type="checkbox"/>	
Property Location: Site		Building #	Room #	Floor

Reinstatement Justification

Found on Station after inventory reconciliation period

Previous Report of Survey

Other (explain) _____

PMB Use Only

IMS Name	Approved <input type="checkbox"/>	Disapproved <input type="checkbox"/>
Justification for disapproval		