EXCESS EQUIPMENT REQUEST

1. Navy ID No. and/or Alpha Letters/Shop ID #:	**Equipment Description/Manufacturer:**

2. Machine Information:

Weight	Utilities ☐ Electrical ☐ Air ☐ Steam ☐ Hydraulic ☐ Gas ☐ Water ☐ Other (Specify) _____
Dimensions	
Date of Manufacture (from equipment tag)	
Condition ☐ Operational ☐ Non-Operational	

3. Machine Location:

Building	Floor	Column	Bay/Room

4. Required Excess Date:

5. Hazardous Material (Check known or suspected hazards to be sampled):

- ☐ Asbestos
- ☐ Blast Media
- ☐ Freon
- ☐ Fire Brick
- ☐ Lubricant (Type, if known) _____
- ☐ Lead
- ☐ PCB's/Oil
- ☐ Mercury
- ☐ Radioactive Material
- ☐ Water Sampling
- ☐ Other _____

Name & Phone No. For Additional Lubrication Information:

6. Responsible Cognizant Technical Code/Shop:

Signature	**Phone No.**	**Date**

7. Requesting Code/Shop:

Superitendent/Division Head Signature	**Phone No.**	**Date**

8. Approved by Code 980:

Signature/Date

9. Approved by Code 106:	**10. Completed Documents Received by Code 106:**
Signature/Date	Signature/Date

11. FEM/Inventory Records Updated by Code 980:	**Replacement CPP Project Number:**
Signature/Date	

Note:
Contact Code 981 @ 396-5765 or 396-5746 for additional information on excess of equipment.

Instructions for Completing Excess Equipment Request

The form is to be initiated by the shop or code that owns the equipment.

Block #1 - Enter any known information about the equipment including identification numbers such as the Navy ID Number, Alpha Letters, the Shop ID number, and a description of the equipment and manufacturer.

Block #2 - Enter the weight, dimensions, date of manufacture (from equipment tag), whether the equipment is currently operational, and check the box to indicate any utilities connected to the equipment.

Block #3 - Enter the location of the equipment. Include the building, floor, column, and bay or room number.

Block #4 - Enter the date required for the equipment removal in order to meet other scheduled events. Allow at least thirty days.

Block #5 - Check the box to indicate any known or suspected hazardous materials contained in or on the equipment. List the type of lubricant used if known. Provide the name and phone number of the person that can provide additional information about the lubricant, e.g., person responsible for lubricating the equipment.

Block #6 - Responsible Cognizant Technical Code/Shop (owning code/shop) is to sign, date and provide telephone number.

Block #7 - Requesting Code/Shop Superintendent or Division Head is to sign, date and provide telephone number.

Block #8 - Code 980 is to sign and date the form indicating agreement of information and approval to excess equipment.

Block #9 - Code 106 is to sign and date the form indicating agreement of information and approval to excess equipment.

Block #10 - Code 106 is to sign and date the form indicating receipt of completed documents per paragraph 5b(6) of this this instruction.

Block #11 - Code 980 is to sign and date the form indicating the FEM/Inventory record has been updated. The replacement Capital Purchases Program (CPP) project number should be provided if the equipment is being replaced.