

Date:

Department Requesting Work: _____

Department ID: _____

Department Contact: _____

Phone Number:

Cost Center or Project ID to be Charged for Work: _____

Equipment Rental Labor Request Description of Work

Requested:

Requested Date to Complete Work:

Location to Complete Work: _____

Email completed form to distribution_services@uta.edu. Please use the Non-Asset Surplus Pick-Up Request Form to request pick-ups of non-asset surplus items. Please contact your department's Inventory Contact regarding surplus capital or controlled assets.

Information below to be completed by Distribution Services after completion of work.

Labor charges are based on \$25 per employee per hour with a minimum of \$35. The table rental rate is \$5 per table for the first day and \$2.50 for each additional day. Chairs are \$1 each for the first day and \$0.50 each for each additional day. The minimum charge for delivery and set-up is \$35. Moving Crates based on availability, rental rate of \$5 for the first day and \$2.50 for each additional day.

Number of Employees: _____

of Table Rentals: _____

Hours of Labor: _____

of Chair Rentals: _____

Total Labor Charges: _____

of Moving Crates: _____

Equipment Cleanings: _____

Total Rental Charges: _____

Equipment Replacements: _____

Work completed by: _____

Date:

Department: _____

Date:

(A copy of this form will be sent to the requesting department when the work is completed)

You may be entitled to know what information UT Arlington collects concerning you. You may review and have UT Arlington correct this information according to procedures set forth in UT System Administration UTS139. The law is found in sections 552.021, 552.023 and 559.004 of the Texas Government Code.

MODIFICATION TO THIS FORM IS STRICTLY PROHIBITED.