

Equipment Pick-Up & Delivery Request/Transfer Form

Requested/Completed By: _____ Date: ____/____/____

☐ Pick-Up Request (only complete pick-up section) ☐ Delivery Request (only complete delivery section)

☐ Transfer Request (complete pick-up and delivery sections)

Date to Pickup/Deliver By: _____

Pick-Up Section

Equipment Location: _____ Date To Be Picked Up: ____/____/____

List equipment to be picked up: _____

Where is the equipment stored and who has the keys? _____

Is there anything currently wrong with the equipment? ☐ YES ☐ NO If yes, please describe: _____

Delivery Section

Location/Property Needed: _____ Date Needed: ____/____/____

Project Description: _____

Est. Length Of Time Needed: ☐ DAYS ☐ WEEKS ☐ MONTHS

Equipment cost included in the project budget: ☐ YES ☐ NO If no, who approved? _____

Type Of Equipment Needed:

☐ AERIAL LIFT

☐ BORING MACHINE

☐ CONCRETE BUGGY

☐ CONCRETE PUMP

☐ CONCRETE SCANNER

☐ CORE DRILL

☐ DEMO HAMMER/JACKHAMMER

☐ DEMO SAW

☐ MINI-EXCAVATOR

☐ PARKING LOT STRIPPER

☐ SAW

☐ SCISSOR LIFT (20FT MAX)

☐ SKID STEER

☐ TRACTOR

☐ TRAILOR SIZE: _____ ☐ OPEN ☐ ENCLOSED

☐ WALK BEHIND CONCRETE SAW

☐ WATER DOG

☐ WOOD CHIPPER

☐ ZIP LEVEL

☐ OTHER (PLEASE BE DESCRIPTIVE) _____

Where/How will the equipment be secured at the site? _____

Will the equipment be under video surveillance? ☐ YES ☐ NO

If no, what measures will be taken to protect the equipment? _____

Email to equipment@medve.com