



## Department Property Administrator Authorization

**Please send signed authorization forms to the Fixed Asset Accountant and keep a copy for your files.**

This is to certify that \_\_\_\_\_ has signature authority

for the \_\_\_\_\_ department and thereby has the authority to sign any

documentation regarding equipment movement in org(s) \_\_\_\_\_

Starting Date \_\_\_\_\_

Ending Date \_\_\_\_\_

\_\_\_\_\_  
DPA signature

\_\_\_\_\_  
Department Head name (print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head signature

\_\_\_\_\_  
Date