

## RICOH RELOCATION REQUEST FORM

**Current Location- (Building/Room#):** \_\_\_\_\_

**New Location-(Building/Room#):** \_\_\_\_\_

**Is there an active port in the new location:** \_\_\_\_\_

**Contact Name/Phone Number:** \_\_\_\_\_

**Requestor/Phone Number:** \_\_\_\_\_

**Relocation Date:** \_\_\_\_\_

**Ricoh Device ID #:** \_\_\_\_\_

**Model Type:** \_\_\_\_\_

**Asset Tag #:** \_\_\_\_\_