



# The University of Mississippi

## University High Bay Storage Request Form

Please answer all questions on this form, attach additional pages as necessary, complete signature block, and electronically submit the entire packet to [pschmidt@olemiss.edu](mailto:pschmidt@olemiss.edu).

### Point of Contact for Storage Space

Contact	Department	Phone Number	Email
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Building Name	Additional points of contact (optional)
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#### Description of Need

Permanent	Temporary	Duration of need	Current Storage Bay #
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Please explain the purpose of requested storage space. (Use additional pages as necessary.)

What type of material / items will be stored in the bay? (Use additional pages as necessary.)

Will one bay be sufficient for the need? yes/no (if no, please explain appropriate space needed)

#### Important Notes to Consider

All items in high bay storage must be stored on pallets to facilitate movement of items with a forklift.

All Items stored in high bay will be reviewed annually to ensure we are utilizing university storage efficiently and all storage needs remain relevant to the department's need.

#### Approvals

Non University Requester (if applicable)

Signature / Date

Department Chair

Department Chair Signature

Date

Dean Name

Dean's Signature

Date

#### Space Management Use Only

Assessment of storage need :

Provost's Assessment