



The University of Mississippi

University Low 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.

Point of Contact for Storage Space

Contact Department Phone Number Email

Building Name Additional points of contact (*optional*)

Description of Need

Permanent Temporary Duration of need Current Storage Cage #

Please explain the purpose of requested storage space. (*Use additional pages as necessary.*)

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

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

Important Notes to Consider

All items in low bay must be stored on pallets and or shelves to prevent any damage to items stored in the facility unless otherwise approved. Pallets and or shelves will be provided by the individual department.

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

When cleaning out your cages, do not leave items in the walkways. Utilize request for disposal services and/or shredding services through FM.

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