



Stock Part Creation or Deletion

ROUTING
Material Services
MSC 3545
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Phone 646-1550

SECTION 1: REQUESTOR INFORMATION

Date (mm/dd/yy): _____ Requestor Name: _____ Phone Number: _____

E-mail Address: _____ Shop Name: _____

SECTION 2: REQUEST DETAILS

Create Stock Part Critical Spare Part

Manufacturer Name: _____ Manufacturer Number: _____

Part Description: _____

Class: _____ Commodity: _____ Item: _____

Unit of Measure: _____ Part needs Conversion? Yes No

Approved Vendor: Yes No Vendor Name: _____

Critical Spare Part

Part Number: _____ Part Description: _____

Purpose for keeping in stock:

Delete Stock Part

Part Number: _____ Part Description: _____

Is on hand quantity at zero? Yes No

Purpose for deleting part from Stock:

SECTION 3: OFFICIAL APPROVAL

Note: All signatures are required for this request to be processed.

Shop Supervisor Printed Name	Shop Supervisor Signature	Date
Responsible Director Printed Name	Responsible Director Signature	Date
Fac and Serv Exec Director Printed Name	Fac and Serv Exec Director Signature	Date
Warehouse Supervisor Printed Name	Warehouse Supervisor Signature	Date

SECTION 4: INTERNAL DEPARTMENT USE ONLY

New Part #: _____ New Bin #: _____ Entered By: _____

Date: _____

Reset