GRCC Appliance Request Form

Instructions

The completion and submission of this form acknowledges that:
1. Appliances covered by this policy include the following items: microwaves, stoves, refrigerator/freezers (without icemaker and water dispenser), dishwashers, coffee makers, and toasters. All other appliance purchases with college funding are prohibited.
2. The facilities department, in partnership with the purchasing department and the internal customer, is responsible for the selection process for all appliances.
3. Departments can purchase appliances with department funds, but all purchases must be processed through the facilities building managers to ensure uniform standard and quality. Departments and individuals should not contact third party vendors without facilities and purchasing endorsement.
4. Purchases will not be supported for individual departments where similar appliances are within close proximity.
5. Infrastructure costs (electrical, plumbing, etc.) to accommodate the requested appliance will need to be paid by the individual department.
6. Personal and/or donated appliances (microwaves, coffee makers, and toasters only) are subject to facilities department approval prior to GRCC use. Please contact the Facilities Manager at isandrorosagomez@grcc.edu or (616) 234-3462 for approval.
7. Submission of this form does not constitute approval. Facilities will review and inform the requestor on approval/rejection status.

Employee Information

Name: _____

Department: _____

Account Number: _____

Phone:_____ Email:_____

Application Request Information

Requested Appliance: _____

Location for Appliance: Building _____ Room _____

Is additional infrastructure needed?:   Yes   No

If yes, please select all that apply: Power   Water   Other

Explanation for Request:

Required Signatures

BCO Name:_____ Date: _____

BCO Signature: _____ Date: _____

Submission Instructions

Please return this form by emailing it to: isandrorosagomez@grcc.edu

Facility Department Use Only

Approved: Yes   No

Signature: _____ Date: _____