



# Daily Equipment Company

## Authorization to Dispose of Lift Truck Equipment

Month: \_\_\_\_\_ DAY: \_\_\_\_\_ YEAR: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Being an authorized representative of the above, I authorize Daily Equipment Company to dispose of the following equipment.

Make: \_\_\_\_\_

Model: \_\_\_\_\_

Serial Number: \_\_\_\_\_

\_\_\_\_\_  
Contact Signature

\_\_\_\_\_  
Date