

## **FEPP Pickup/ Removal Request**

Fire Department Information		
Department Name:		_
Department Address:		
Department Telephone:		
Point of Contact Information		
Name:	Home Phone:	
Work Phone:	Cell Phone:	
Information on item to be picked up		
Description of the item (example: 2.5 ton 6X6 truck):		
FEPP Number:		
Serial Number or VIN Number:		
License Number (If a vehicle):		
Description of where the item is currently located:		
Can it be accessed by an 18 wheeler haul truck?:		
If the item is a vehicle		
Does the engine run?:		
Are the tires inflatable?:		
Are the wheels/axles locked or will it roll?:		
Printed name of person requesting removal		Date
Signature	_	

Please submit this document via email or fax.

Email: <u>fepp@tfs.tamu.edu</u>

Fax Number: (936) 639-8138 ATTN: FEPP Program