TEXAS A&M UNIVERSITY-CORPUS CHRISTI TRANSFER DEPARTMENTAL PROPERTY (TDP) APPROVAL AUTHORIZATION FORM

(s/b listed as approver below) CONTACT PERSON: EXT: Part A	FOUR/FI	VE LETTER DEPT CODE:_	DATE:
CONTACT PERSON: Part A Do you want the TDP routing to follow your normal department routing and approval paths? If yes, please skip Part B and sign bottom of form. If no, please continue to Part B. Part B APPROVER#1 (optional-fill in if a stop is needed prior to final approver) NAME UIN FINAL APPROVER (ONLY STOP OR FINAL STOP TO APPROVER #1) NAME UIN FINAL APPROVER (ONLY STOP OR FINAL STOP TO APPROVER #1) SIGNATURE FINAL APPROVER - SUB NAME UIN FINAL APPROVER - SUB NAME UIN FINAL APPROVER - SUB	SUB DEP	T CODE:	
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	1 1003	ic sign to acknowledge y	our department's TDP routing and approval path.

Dept Code

Date

Signature of Accountable Property Manager