

OIT Request for Destruction of Storage Media

Please :

- Complete shaded fields on this form (*the other fields are optional*)
- Complete one form for each box of items to be destroyed

Description of Item(s) to be Destroyed		
Type and Number of Items (indicate number of items as appropriate):		
Hard Drive (s) _____	CD/DVD _____	Other (describe below) _____
Comments (e.g., sensitive information, special concerns, etc.):		

Contact Information	
Party Requesting Destruction of Item	
Name	Phone
Organization	
Owner of Item (if different from above) Prior to Delivery for Destruction	
Name	Phone
Organization	

Custody			
Date and Time	From	To	Reason
	Name	Name	Storage Pending Destruction
	Signature	Signature	
	Name	Name	Destruction
	Signature	Signature	