

C5 – RTD Program

Enclosure 8 - Letter of Authorization to Remove Property

Date: _____

To: DRMO

From: _____

I, _____ the undersigned, hereby authorize
(PRINT NAME)

_____ to remove the below listed requisitions on my behalf.
(PRINT NAME)

Extent of Authority: **To remove property.**

SIGNATURE OF CUSTOMER: _____

LIST ITEM(S) by Requisition/*DTID* Number:

The provisions of this publication apply to all Remaining Government personnel at impacted, non-impacted and non-competed sites. This publication may be mandatory or advisory to the MEO, as stipulated in or modified by the Performance Work Statement.