

# Furniture Services Request

Please complete the following form and submit to [furniture@ucmerced.edu](mailto:furniture@ucmerced.edu)

**\*Required**

Requestor Name\*

Email\*

Phone Number\*

Department\*

Project Location (building, room number)\*

Description of furniture request\*

*Includes changes to electrical, data, and/or number of occupants in the space.*

FAU\*

Is there a critical date that this work needs to be completed? Yes  No

*If yes, indicate the reason why in the space provided below.*

Please have the Dean, Vice Chancellor or Designee sign the below and submit completed request to:

[furniture@ucmerced.edu](mailto:furniture@ucmerced.edu)

Signature

Date

Printer Name and Title