

Electrical Appliance Request Form

Reference Pine Technical and Community College Policy #603

<u>Appliance Type</u>	<u>Brand</u>	<u>Size</u>	<u>Required specifications</u>
Coffee maker	_____	_____	Automatic shutoff/timer
Refrigerator	_____	_____	3 prong cord
Humidifier	_____	_____	3 prong cord, or Class 2, double insulated
Microwave	_____	_____	3 prong cord
Fan	_____	_____	3 prong cord, or Class 2, or double insulated
Lighting Fixture	_____	_____	less than 40 watts
Other	_____	_____	provide description of appliance

Provide rationale for request:

Portable heaters are allowed only in very limited circumstances.

Model: _____ ground plug, & tip over protection required.

These appliances are not allowed:

Toasters, hot/heating pads, hot plates, plug in fragrances

Accommodations can be made with the documented approval by a Physician.

These accommodations must be in writing and attached to this form.

Please submit this form to your Supervisor for approval.

Upon approval by the Supervisor and if needed Human Resources, final approval is required by the Physical Plant Supervisor

Requestor Signature : _____

Supervisor Signature: _____

Physical Plant Signature: _____

Approve _____ Reject _____

Approve _____ Reject _____

**** Disposal or removal of appliances is the responsibility of the owner of the appliance ****