REQUEST TO MODIFY EQUIPMENT DENSITY AND MAINTENANCE PLAN ROSTER/ VEHICLE REGISTRATION REQUEST FORM

DATE:_____

FROM: _____ **POC:** _____ **EMAIL/ PHONE:** _____
REQUESTING ORGANIZATION

SUPPORTING: _____ **POC:** _____ **EMAIL/ PHONE:** _____
SPONSORING ORGANIZATION

TO: US Army Garrison Kwajalein Atoll: Maintenance Department

SUBJECT:
- (●) ADD TO DENSITY
- ( ) REMOVE FROM DENSITY
- ( ) REGISTRATION ONLY

_____ POC SIGNATURE

_____ SUPPORTING POC SIGNAURE

#	Registration Number	Organization Admin No.	EQUIPMENT DESCRIPTION	LIN#	MAKE	MODEL	YEAR	VIN Serial Number	GVWR	Vehicle Color	Fuel Type	Vehicle Type
1												
2												
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USAG-KA MAINTENANCE MANAGER/COR SIGNATURE/ DATE