



GATE PASS FORM

Document No. : FM-CM-03-01

Effective Date: July 30, 2019

Control No. : _____

Date: _____

Please allow the Bearer Mr./Mrs./Ms. _____ of _____
(Name of Employee/Supplier) (Department/Name of Company)

to bring out the following on _____.
(Date)

DESCRIPTION	PROPERTY CODE	QTY	Unit	Expected Date of Return	Date Returned

Type of Transaction	Reference
Disposal/Sale ☐	PMRS/OR# ☐
Transfer to other Location ☐	PMRS# ☐
Donation ☐	PMRS#/Donation Letter ☐
Repair/Replacement ☐	Authorization Letter/Specify Location _____
On Loan and to be returned ☐	
Others _____	

Verified by / Date	Approved by / Date	Inspected by	Received by / Date	Plate #
Facilities Officer/Dept. Head	Administrative Officer	Guard on Duty	Driver's / Bearer's Name	Vehicle

(TO BE FILLED UP UPON RETURN OF ITEM/S ON LOAN)

Remarks on Item/s Returned:

Inspected by / Date:

Property and Supplies Bookkeeper

Mapua Technical Personnel / Dept.

Security Guard

Distribution: Original Copy - Initiator

2nd Copy - Security Guard (Control Base)