



Materials Request Form

Administrative Services Department
Mesa Consolidated Water District
1965 Placentia Avenue, P.O. Box 5008 Costa Mesa, CA 92627-5008
Fax # (949) 574-1036

Questions? Please call us at (949) 631-1205

Contact Information:

Date of Request _____
Contact Name _____
Organization _____
Street Address _____
City _____ State _____ Zip _____
Phone # _____ Fax # _____ Email _____

Usage Information:

Materials Requested _____
Briefly describe what
the materials will be
used for _____

Date materials will be returned (if necessary) _____

By signing this form, I acknowledge that I am not to duplicate or reproduce the materials I have borrowed without permission. I agree to return materials if necessary by the date above and in the condition in which they were given to me. I also acknowledge, understand and agree I am responsible for the cost of replacing the materials if lost, stolen or damaged.

Contact's Signature/Date _____

For Mesa's Use Only

Materials Provided:

Date Provided:

Approved By:

Date Returned
(if necessary):