

Asset Disposal/Move Form

Contact Name	P-Tag Number	
Phone Number		
Department	Attach	
Disposal/Move Date	P-Tag	
Asset Serial#/VIN		
Asset Description		

Select one of the following disposal/move actions and complete all information in the section.

0	Transferred	
	From Department:	To Department:
	Department Contact:	Department Contact:
	User Org #:	User Org #:
	Bldg Name:	Bldg Name:
	Room #:	Room #:

Was there an attempt to repurpose among the University community before selling, trading-in, donating or discarding?

🗌 Yes		No
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If No Please Explain:

0	Sold				
	Sale Price \$				
	Money Deposited To _	Fund	Org	Account	



Traded In

Used to Purchase:

From Vendor:

Attach a copy of the invoice showing the trade in value to this form.

\bigcirc	Donated, Discarded, or Other		
	Donated Agency Name		
	Discarded Reason		
	Other - Explanation		
	Attach a donation receipt to this form.		

Name:_____

Date: _____

Net Book Value Up to \$5,000

Unit Budget Officer: _____

Date: _____

Net Book Value \$5,000 - \$10,000

Deans/ Directors: _____

Date: _____

Net Book Value greater than \$10,000

University Controller: _____

Date: _____