

Equipment Inventory Action/Update Request Form

INSTRUCTIONS: Complete the form as directed and send the original to the University Property Management Department. Please keep a copy for your records.

1. Indicate department name, department code, date, name of department contact and phone number in space provided.
 2. Check appropriate box indicating type of action, update, or approval requested.
 3. Provide all information required on each item as applicable. *(Include serial number in description. If no SU tag, write "none.")*
 4. If items(s) are being transferred between departments at SUNO, receiving department must sign this form in the space provided below.

Note: Column marked "RECD. Y/N" is for use by Property Management Department when processing surplus or by departments receiving transfer.

 5. If trade in request, department must indicate requisition number for new item(s) in comments. Trade-ins must have prior approval from state.
 6. Use comments section for explanations or to provide further information. Obtain signatures as required. Attach continuation sheet if needed.

Department: _____

Department Code: _____

Date: _____

Contact Name: _____

Phone Number: _____

ACTION/UPDATE/APPROVAL REQUESTED:

☐ Transfer to Surplus
 ☐ SUNO Departmental Transfer
 ☐ Trade-In
 ☐ Inventory Record Adjustment or Update (Explain in Comments Section)

☐ Scrap
 ☐ Transfer to Another State Agency
 ☐ Theft Report (Attach Police Report)
 ☐ Dismantle for Parts
 ☐ Sale: As is/Where is

☐ Lost Report (Explain in Comments Section)
 ☐ Other (Explain in Comments Section)

SU INVENTORY TAG NUMBER	ITEM DESCRIPTION	CURRENT LOCATION	NEW LOCATION (If transferred or updated)

COMMENTS: _____

DEPARTMENT SUBMITTING REQUEST		RECEIVING DEPARTMENT FOR TRANSFER	PROPERTY MANAGEMENT OFFICE
Property Custodian (Type/Print Name)	Department Name		<input type="checkbox"/> RECEIVED <input type="checkbox"/> APPROVED <input type="checkbox"/> MASTER FILE UPDATED
Signature Date			
Department Head (Type/Print Name)	Department Head (Type/Print Name)	Property Manager or Designee (Type/Print Name)	
Signature Date	Signature Date	Signature Date	