



ASSET DISPOSAL FORM

This form must be completed and all approvals obtained **prior** to asset disposal

Assets:

Property: _____ LC Tag #: _____

Property: _____ LC Tag #: _____

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Property: _____ LC Tag #: _____

Property: _____ LC Tag #: _____

Property: _____ LC Tag #: _____

*If more space is needed attach a detailed list to this form

**If property was purchased through a grant, written authorization must be received from the awarding agency. If the awarding agency does not have a need for the property, the College asset disposal policy may be followed.

Grant funded? Y/N If yes, please attach copy of authorization for disposal from awarding agency.

Aggregate value of property or highest bid (circle one): \$ _____

Method for determining value: _____

Requested method of disposal: _____

Recipient of property (name or organization): _____

Employee signature: _____

Supervisor approval: _____

Submit this form to the Director of Capital Projects and Campus Operations for review.

Director, Capital Projects and Campus Operations

Date

VP, Administration

Date

Operations use only:

If aggregate value of Property is over \$500, date of Board approval: _____

If aggregate value of Property is over \$1,500, date of public auction: _____

Waiver form signed by both parties: _____

Date of disposal: _____

If sale, account number to receipt: _____

Copy of receipt to: _____

Property removed from inventory: _____

Property removed from insurance: _____