

# Fixed Asset Disposal/Transfer Form

Asset Description: \_\_\_\_\_

Building: \_\_\_\_\_ Department or Room #: \_\_\_\_\_

Tag #: \_\_\_\_\_ Serial #: \_\_\_\_\_ Model #: \_\_\_\_\_

Disposed or  Transferred Date: \_\_\_\_\_

If disposed, reason: \_\_\_\_\_

If transferred, New Building: \_\_\_\_\_ and New Department or Room #: \_\_\_\_\_

Comments:

Signature of person completing the form: \_\_\_\_\_ Date: \_\_\_\_\_

**Please submit completed form to the Business Office.**

## For Business Office Use Only

Fixed Asset #: \_\_\_\_\_

Date Smart Finance Updated: \_\_\_\_\_