

### Equipment Transfer Form

**Instructions:**

Complete tag number, description, serial number, current and new location. Provide as much descriptive information as possible. Both Division Chairs must sign. New location must send **original** with both signatures to the Financial Services office.

Asset Tag Number	Description/Manufacturer	Serial No.	Current Location (Building & Room)	New Location (Building & Room)

Current Location		New Location	
<b>Department:</b>		<b>Department:</b>	
<b>Div. Chair (print):</b>	<b>Phone:</b>	<b>Div. Chair (print):</b>	<b>Phone:</b>
<b>Div. Chair (signature):</b>	<b>Date:</b>	<b>Div. Chair (signature):</b>	<b>Date:</b>

**Signature(s)**

\_\_\_\_\_   
 Person Making Request

\_\_\_\_\_   
 Date

\_\_\_\_\_   
 Supervisor Signature (for non-Academic Dept.)

\_\_\_\_\_   
 Date