



## FIXED ASSET DISPOSAL REQUEST

DATE: \_\_\_\_\_ DEPARTMENT NAME: \_\_\_\_\_

DESCRIPTION OF ASSET: \_\_\_\_\_

SERIAL NUMBER: \_\_\_\_\_

TAG NUMBER: \_\_\_\_\_

REASON FOR DISPOSAL REQUEST: \_\_\_\_\_

DATE PURCHASED: \_\_\_\_\_

COST OF ITEM WHEN PURCHASED: \_\_\_\_\_

CURRENT CONDITION OF ITEM: \_\_\_\_\_

**DISPOSAL RECOMMENDATION:**

TRADE IN \_\_\_\_\_ SCRAP \_\_\_\_\_

DEPARTMENT HEAD APPROVAL: \_\_\_\_\_

**DISPOSAL APPROVAL:**

COUNTY ADMINISTRATOR: \_\_\_\_\_ DATE: \_\_\_\_\_

COUNTY BOARD (ITEMS OVER \$5000.00 VALUE) \_\_\_\_\_

DATE: \_\_\_\_\_

**DISPOSAL METHOD:**

TRADE IN AMOUNT \$ \_\_\_\_\_ ITEM TRADED IN ON: \_\_\_\_\_

SALE AMOUNT \$ \_\_\_\_\_ DATE: \_\_\_\_\_ RECEIPT # \_\_\_\_\_

SCRAP \_\_\_\_\_

SURPLUS \_\_\_\_\_ STORED AT: \_\_\_\_\_

SALVAGE \_\_\_\_\_ GIVEN TO: \_\_\_\_\_