



FIXED ASSET DISPOSAL REQUEST (For Scrap Only)

Form fields for CUSTODIAN NUMBER AND NAME, DATE (MM/DD/YYYY), PREPARED BY, TRANSACTION NUMBER, ADDRESS/EXTENSION. Includes text: OSUIT: 1801 East 4th St., Okmulgee, OK 74447

**ASSETS CONTAINING HAZARDOUS OR RADIOACTIVE MATERIALS MAY NOT BE REMOVED FROM DEPARTMENT FOR DISPOSAL UNTIL SUCH HAZARDS HAVE BEEN REMOVED AND CERTIFIED BY ENVIRONMENTAL HEALTH AND SAFETY AND/OR THE RADIOLOGICAL SAFETY OFFICER. CERTIFICATION OF HAZARDOUS MATERIALS REMOVAL MUST ACCOMPANY THIS FORM.

REMOVAL SECTION: R5 - SALVAGE. DOES ITEM CONTAIN HAZARDOUS MATERIAL? 6. SALVAGE 7. SCRAP. CONDITION CODES:

Table with columns: ASSET TAG NO(S), RC, SERIAL NO, ITEM DESCRIPTION, MFG/MODEL, YES OR NO, CURRENT LOCATION, COND CODE, REASON FOR DISPOSITION, ORIGINAL VALUE, CURRENT VALUE.

TOTAL VALUE OF DELETIONS 0.00 0.00

CUSTODIAN REQUESTS DISPOSITION BY: PP PICK UP AND SURPLUS AUCTION SEALED BID DEPT AUCTION CANNIBALIZATION

COMMENT:

FOR MORE INFORMATION ON DISPOSALS CONTACT: NAME: EXTENSION: EQUIPMENT LOCATED AT:

RELEASING DEPARTMENT CERTIFICATION "I relinquish inventory accountability for the above described equipment." PLEASE NOTE: THIS FORM MUST BE APPROVED BY DEAN OR VICE PRESIDENT IF EQUIPMENT IS REMOVED FROM INVENTORY

SIGNED: DEPARTMENT HEAD DATE VICE PRESIDENT OF FISCAL SERVICES DATE