

THE UNIVERSITY OF TENNESSEE
Equipment Inventory Change/Deletion Request

Campus/Unit _____ Effective Date _____

Current Custodial Dept. _____

Cost Center Name _____ Cost Center No. _____

EQUIPMENT

Asset Number	UT Tag Number	Description	Serial Number	Cost

(Attach sheet for additional items)

ACTION REQUESTED

Transfer to Another Department:

Receiving Department _____
 Cost Center Name _____ Cost Center No. _____
 New Location—Bldg. Number _____ Room Number _____

Delete From Official Inventory Records Due To:

- Trade-in (attach copy of invoice including trade-in value and copy of purchase order, if applicable)
- Disappearance* (attach explanation describing the circumstances; send form to the campus/institute chief business officer or designee)
- Theft (attach copy of police report)
- Dismantlement
- Other (explain) _____

APPROVALS

Current Custodial Department:

Signature: _____ Date: _____

Print: _____

Contact name: _____ Phone/email: _____

Receiving Department:

Signature: _____ Date: _____

Print: _____

Contact name: _____ Phone/email: _____

*CBO/Designee (for disappearance only): _____