



## Property Control Form for

*Please return the completed form to the Property Management Office*

**Requestor / Liaison Name:**  
*(Please print)* \_\_\_\_\_

**Department Name:** \_\_\_\_\_

**Building and Floor / Room:** \_\_\_\_\_

**Phone / Fax:** \_\_\_\_\_ **Date:** \_\_\_\_\_

- |                     |  |                                       |  |
|---------------------|--|---------------------------------------|--|
| <i>Please Check</i> | <input type="checkbox"/> Cannibalized      | <input type="checkbox"/> Donated/Gift | <i>[ Please attach "Agreement for Donation" ]</i>            |
|                     | <input type="checkbox"/> Discarded         | <input type="checkbox"/> Exchanged    | <i>[ CUNY Tag# of the new property _____ ]</i>               |
|                     | <input type="checkbox"/> Salvaged          | <input type="checkbox"/> Loss         | <i>[ Explain how: _____ ]</i>                                |
|                     | <input type="checkbox"/> Scrapped          | <input type="checkbox"/> Sold         | <i>[ Please attach "Agreement for Sale" ]</i>                |
|                     | <input type="checkbox"/> Obsolete          | <input type="checkbox"/> Stolen       | <i>[ Please attach "Incident Report and Police Report" ]</i> |
|                     | <input type="checkbox"/> Return for Credit | <input type="checkbox"/> Written Off  | <i>[ Explanation is required: _____ ]</i>                    |
|                     | <input type="checkbox"/> Traded            | <input type="checkbox"/> Transfer     |  |

**Authorization Given To:**

**Certified By**

**Requestor / Liaison Signature:** \_\_\_\_\_

**Chairperson/Director/Dean:**  
*(Please print)* \_\_\_\_\_

*(Please sign)* \_\_\_\_\_

**I CERTIFY THAT ALL SOFTWARE AND PERSONAL FILES ARE REMOVED FROM COMPUTER BEING DISPOSED  
Information Technology**

**Personnel:** *(Please print and sign)* \_\_\_\_\_ **Date:** \_\_\_\_\_

**PROPERTY HAS BEEN PICKED UP / RECEIVED BY:**

*(Please print)* \_\_\_\_\_ **Phone:** \_\_\_\_\_

*(Please sign)* \_\_\_\_\_ **Date:** \_\_\_\_\_

CUNY Tag #	Description	Manufacturer	Model #	Serial #	From	To	New Responsible Person and / or Department (Code)
					Building and Room	Building and Room	

**For Property Management Office Use:**

**Property Manager Approval Name:** *(Please print)* \_\_\_\_\_

*(Please sign)* \_\_\_\_\_

**Date:** \_\_\_\_\_