

**City of Hammond Purchasing Department
Surplus/Transfer Request Form
[Use a Separate Form for Different Dispositions]**

I.			
Department Name:		Date:	
Approved By:	Fax:	Ext.:	
Requested Disposition:			
<input type="checkbox"/> Surplus item(s) to City of Hammond Property Control <input type="checkbox"/> Department wishes to keep item(s) & dismantle for parts to repair like equipment. <input type="checkbox"/> Transfer tagged property to _____ Dept* New Location: _____			
NOTE: *IF PROPERTY HAS BEEN MOVED-COMPLETION OF SECTION III IS REQUIRED.			
PROPERTY #	DESCRIPTION OF PROPERTY	LOCATION	CONDITION

II.	
THIS SECTION TO BE COMPLETED BY PROPERTY CONTROL STAFF	
Form Received By Property Control	Date:
<input type="checkbox"/> To be transported by Physical Plant to PC Surplus <input type="checkbox"/> To be transferred to another dept as indicated <input type="checkbox"/> None/Property delivered with form by department <input type="checkbox"/> Authorization for dept to cannibalize for parts	
Authorized By Property Control:	Date:

III. ATTENTION:		
DO NOT SIGN UNTIL ITEMS ARE PICKED UP OR TRANSFERRED		
Released By:	Dept Name:	Date:
Received By;	Dept Name:	Date:
Completed By:	Dept Name:	Date:

