

Pikes Peak Community College
PROPERTY DISPOSAL / TRANSFER REQUEST

Property (item) description: _____

Please route completed form and item(s) to ITSS for electronic items such as computers, fax machines, typewriters, TV/VCR, etc.
DO NOT process cell phones using this form. Refer to MyPPCC for more information.

PPCC Bar Code: _____ **Serial #:** _____

Origin of Property (new/used, gift/donation, Perkins funded, grant, etc.) _____

Hazardous Material/Content: Does the item(s) contain hazardous material? No [] Yes [] Explain:

Reason for disposal/transfer (please check one):

- item in good condition, but no longer meets division/department needs
- item in poor condition & not cost effective to repair (explain) _____
- other (please explain) _____

Suggested method of disposal / transfer (please check one)

- transfer to another PPCC department or state agency (list suggested department/agency, if known) _____
- sell through sealed state bid process
- donate to eligible organization (list suggested agency and contact information, if known) _____
- turn over to State Surplus
- disposal (trash)
- other (please explain) _____
- no preference; at the discretion of Facilities & Operations

Current location of property/item: _____

Transporting property/item (please check one)

- property/item will be delivered to Facilities, B229 by respective division/department
NOTE: deliver all electronics (computers, projectors, TV/VCRs, etc.) to ITSS, B201
- a Facilities work request will be submitted by division/department to have item(s) picked up.
NOTE: Submit an ITSS work request for all electronics (computers, projectors, TV/VCRs, etc.)

Please coordinate transportation and/or relocation of furniture items through Facilities Office

Prepared by (please print): _____ Date: _____
Division/Department: _____, Room # _____, Phone # _____
Dean/Director approval: _____ Date: _____
ITSS approval: _____ Date: _____
(ITSS signature required for computer equipment, fax machines, typewriters, TV/VCR's, etc.)
Perkins Representative approval: _____ Date: _____
(Signature required only for Perkins funded items)
Vice President approval: _____ Date: _____
(VP required if property cost \$1,000 or more and had a useful life of 2 or more years)

For Facilities & Financial Services Use Only

Temporary storage location: _____ **Asset Value:** \$ _____
Final disposal / transfer method _____ **By:** _____
Date copy sent to Financial Services, if applicable: _____
Processed by: _____ **Date:** _____