

# UNIVERSITY OF VIRGINIA EQUIPMENT INVENTORY CHANGE REQUEST (P-1)

## Section A Transaction Identification

### TRANSFERS

Attach justification letter if transferred to another institution

Check one	To Another	Name & Location
	Department/Organization	
	Location(Intradepartment)	
	Institution/State Agency	
	Other (Specify)	

### DISPOSALS

Attach explanation of transaction(s) and supporting document(s)

Check one	Type
	Trade-in <b>P.O.#</b> (required)
	Returned for Replacement
	Cannibalized
	Theft/Disappearance
	Surplus
	Other (Specify)

## Section B Equipment Identification

### EQUIPMENT IDENTIFICATION

Asset Tag Number	Description	Old Location	New Location (bldg,room)

## Section C Department/Organization Identification

### DEPARTMENT/ORGANIZATION IDENTIFICATION

#### RELEASING DEPT./ORG.

ORG Number & Name : \_\_\_\_\_

Contact Person & Phone Number: \_\_\_\_\_

Signature of Contact : \_\_\_\_\_ Date \_\_\_\_\_

Print Name of Dept./Org. Head : \_\_\_\_\_

Signature of Dept./Org. Head : \_\_\_\_\_ Date \_\_\_\_\_

#### RECEIVING DEPT./ORG.

ORG Number & Name : \_\_\_\_\_

Contact Person & Phone Number: \_\_\_\_\_

Signature of Contact : \_\_\_\_\_ Date \_\_\_\_\_

Print Name of Dept./Org. Head : \_\_\_\_\_

Signature of Dept./Org. Head : \_\_\_\_\_ Date \_\_\_\_\_

Return Original to Fixed Assets (Property) Accounting, Dept. of Financial Analysis, Carruthers Hall.  
Retain copy for all parties involved. Questions 924-4209 or 924-4284 Fax 982-2163

### FIXED ASSETS (PROPERTY) ACCOUNTING APPROVAL

Name : \_\_\_\_\_ Date \_\_\_\_\_

Signature: \_\_\_\_\_