Scan & Email this form to: controller@umn.edu

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UM 1393 Rev: 02/2021

U Wide Form:

Phone: 612/624-1617

Capital Equipment Asset Disposal Form

Use the form when disposing of currently recorded capital equipment assets.

ACCOUNTING SERVICES

PROPERTY DIS	POSAL (Check a	appropriate boxes)			
			inter, multi-function device) has a hard dr ation Security Policy at	ive	
External Tr External Sa Donation Scrap Other		(-appo)			
DEPARTMENTA	AL REASON FO	OR REQUEST (JUS	STIFICATION)		
PROPERTY DETAIL (use additional page if necessary)					CHECK IF BOUGHT
Asset Tag No.	Serial No.	Model No.	Description		ON SPONSORED FUNDS
Troperty Disposal	Recommendat	ion – Accounting So	El VICES		
CUSTODIAL RE	SPONSIBILIT	Y:			
Department Name				Dept. ID#:	
Requested By:			Phone:	Date:	
			Room#:		
APPROVALS (Rec	quester should obtair	n signature below) :			
Form Approver (p	orint name):	(Administrator, R	RC Contact, Department Head, or Dean)		
Form Approver (signature):				Date:	
Office of the Controller (signature):				Date:	
	Scan & Emai	l this form to: Acco	unting Services, controller@umn.edu		