

Property Disposal Request Form

Submitter Information	Date: _____
Dept: _____ Name: _____	Email: _____

Property Information		
Tag #: _____	Description: _____	Purchased using grant funds?
Location (Bldg/Room): _____	Purchase Price: _____	Yes No
<i>If more than one item, attach listing. Total number of items: _____</i>		Unknown
<i>Total acquisition cost: _____</i>		

Recommended reason for disposal (contact co-accounting@mines.edu if your disposal reason is not listed)	
No longer need/Will transfer to Surplus	Software - obsolete or no longer in use
Broken/damaged (will not be repaired)	Trade-in with supplier (supplier name): _____
Cannibalized/dismantled for parts	Lost/Stolen *must include incident report signed by Dept Head and submitted to Mines Police Dept

<p>Next Steps After this form is completely signed, remove Mines tag sticker from equipment and contact:</p> <ul style="list-style-type: none"> -Mines Sustainability for lab equipment and working surplus poole@mines.edu -Facilities Management for non-working surplus and e-waste https://www.mines.edu/operations/submit-a-work-order/ -ITS for computer/hard drive related disposals http://help.mines.edu -EHS if the equipment may be hazardous ehs@mines.edu <p><i>For more information, reference CSM Property Manual https://www.mines.edu/controllers-office/controllers-office/general-accounting/property-equipment/</i></p>
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<i>Request is hereby made for the disposal of the listed University property.</i>	
<i>I, hereby affirm that (to the best of my knowledge and belief) the article(s) of property listed above are surplus to Mines and this department and are to be sold or traded, or the property is lost, damaged, worn out or destroyed. Items listed as sold or traded will be done so in cooperation of Facilities Management. Lost or stolen items were reported to Campus Police and documented by the attached report. Trade-in equipment is documented by the attached quote.</i>	
Submitter Signature: _____	Date: _____
Department Head Signature: _____	Date: _____
Controller's Office Signature: _____	Date: _____