TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER

DEPARTMENTAL CERTIFICATION FOR SURPLUS OF AN INVENTORIED ITEM
(For Broken, Obsolete, Unserviceable, or Surplus Property)

Department:	ORG Code:	Date:

To: **PROPERTY MANAGER**
I request that the item(s) below be removed from the inventory of this department.

Inventory #:	Description:	
Inventory Carrying Value:	Date Acquired:	Document ID #
I have personally examined the item(s) and request this change for the following reason:		
		Transfer Request #
Disposition suggested:		PUB #
Estimated residual value:		TCI Pallet #

Computer Equipment Certification: Service Tag #: _____

Does this piece of equipment have any type of storage device (hard drive, SIM card, etc.) still attached and functional?

_____Yes   _____No   N/A

Hazardous Certification:

I certify that the item has been checked and determined to be free of hazardous material.

Date Checked: _____   By: _____   Signature: _____
* Attach Decontamination Form (HSC OP 75.05, Attachment A) if applicable.

Confidential Information Certification:

I certify that the item has been checked and determined to be free of all Confidential Information.

Date Checked: _____   By: _____   Signature: _____

Property custodian's signature indicates that all items have been checked and ALL confidential information removed.

Signed _____
                                    Property Custodian

_____
                                    Type or Print Name

_____
Signature of Surplus Property Custodian

Surplus Property Manager
Authorization to transfer to
Surplus Inventory ORGN: _____
New Location - Building: _____
Room Number: _____

_____
Type or Print Name of Surplus Property Custodian

TO BE COMPLETED BY PROPERTY INVENTORY

DATE ENTERED: _____   **SIGNATURE:** _____

MAIL TO: **Surplus Property Manager:**
General Services, 3601 4th St STOP 9012, Lubbock, Texas 79430-9012
General Services, 4801 Alberta, El Paso, Texas 79905
General Services, 1400 Wallace Blvd., Amarillo, Texas 79106
Facilities, 800 West 4th St, Odessa, Texas 79763-4362

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Instructions for Completing the

DEPARTMENTAL CERTIFICATION FOR SURPLUS OF AN INVENTORIED ITEM FORM

1. **DEPARTMENT** - Enter the name of your department.

2. **ORG CODE** - Enter the level 5 organization code of your department (not the paid account).

3. **DATE** - Enter the current date.

4. **INVENTORY #** - Enter the inventory tag number. This is the number on the inventory tag which was affixed to the property by Property Inventory (not the serial number).

5. **DESCRIPTION** - Enter a brief, but accurate description of the property.

6. **INVENTORY CARRYING VALUE** - Enter the inventory carrying value.

7. **DATE ACQUIRED** - Enter the date that the property was purchased.

8. **DOCUMENT ID #** - Enter the voucher number. This is the transaction that recorded the acquisition of the property.

9. **DISPOSITION SUGGESTED** - State how you would like the property disposed of, such as:

    a.   Sell to the highest bidder.
    b.   Junk, dispose of as salvage.
    c.   Use as a trade-in for new property.
    d.   Make available for transfer to other departments.
    e.   Retain to be utilized for parts to maintain other property.

10. **ESTIMATED RESIDUAL VALUE** - The value entered should be an estimate of the amount you believe could be obtained upon sale of the item.

11. **TRANSFER REQUEST #** - Enter the number received when the online property transfer was submitted.

12. **COMPUTER CERTIFICATION** – Enter the service tag number and indicate whether or not the equipment has any type of storage device.

13. **HAZARDOUS CERTIFICATION** – If appropriate, enter the date the item was inspected for hazardous materials and the name of the person performing the inspection.

14. **CONFIDENTIALITY CERTIFICATION** – Signature of person verifying all storage areas (i.e. file cabinets, drawers, enclosed areas, etc.) do not contain any confidential information.

15. **PROPERTY CUSTODIAN** - This is usually the head of the department unless the responsibility has been officially delegated to someone else in writing by the head of the department.

16. **DO NOT ENTER ANY INFORMATION IN THE YELLOW OR GRAYED AREAS.**

MAIL TO: Surplus Property Manager at your campus, as listed on the form