



TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER EL PASO
Inter-agency Property Transfer Request

Transferor Agency: TTUHSC EL PASO Agency Number: 774

Transferee Agency: _____ Agency Number: _____

Agency Representative: _____ Phone: _____

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

Property Custodian: _____ Date: _____
 (Signature)

TTUHSC El Paso Inventory Tag Number	Description	Serial #	Unit Cost	Other Agency's Inventory Tag Number

All sections must be completed/signed before submitting.

Does the equipment store any data? Yes No

Computing Device Certification: To be completed by IT department.
 I certified the equipment has been checked and cleared of any hard drive and storage media.
 Print Name: _____ IT Signature: _____ Date: _____

Confidential and Hazardous Certification: To be completed by Custodian/Delegate.
 I certify that all item(s) have been declared surplus and cleared of any hazardous material and/or confidential information (i.e. file cabinets, drawers, enclosed areas, etc.). *Attach Decontamination Form (HSCEP OP 75.05, Attachment A) if applicable.
 Print Name: _____ Custodian/Delegate Signature: _____ Date: _____

TO BE COMPLETED BY PROPERTY INVENTORY

SIGNATURE: _____ **DATE:** _____

Submit

Please click the **Submit** button to email the completed form to: baelp-asset.accounting@ttuhsc.edu (Property Management).

TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER EL PASO

FORM INSTRUCTIONS

INTER-AGENCY PROPERTY TRANSFER REQUEST

This form is to be completed by the department initiating the transfer of property (Transferor) and forwarded to the Property Manager.

1. **TRANSFEROR** - This is the agency that is transferring the item(s).
2. **AGENCY NO.** - To be completed by Property Management.
3. **TRANSFeree** - This is the name of the agency that will be receiving the property.
4. **AGENCY NO.** - To be completed by Property Management.
5. **NAME OF AGENCY REPRESENTATIVE** - This is the contact name of the person at the non-TTUHSC El Paso-affiliated agency equipment is to be transferred to or from.
6. **PHONE** - This is the contact number for the agency representative.
7. **PROPERTY CUSTODIAN** - This is usually the head of the department unless the responsibility has been officially designated to someone else in writing by the head of the department.
8. **DATE** - This is the current date.
9. **TTUHSC EL PASO INVENTORY TAG NUMBER** - Enter the inventory tag number. This is the number on the inventory was which is affixed to the property and assigned by Property Management (not the serial number). To be completed by Property Management if TTUHSC El Paso is receiving the transfer.
10. **DESCRIPTION** - Enter a brief, but accurate, description of the property.
11. **SERIAL NUMBER** - Enter the serial number. This is the number which is assigned to the property by the manufacturer.
12. **UNIT COST** - Enter the purchase price, or other established value, for the item, such as fair market, value at the time of the transfer.
13. **OTHER AGENCY INVENTORY NUMBER** - To be completed by Property Inventory.
14. **COMPUTING DEVICE CERTIFICATION** - Indicate whether or not the equipment store any data. If so, the IT department will need to confirm the data has been wiped out.
15. **CONFIDENTIALITY AND HAZARDOUS CERTIFICATION** - Signature of person verifying all storage areas (i.e. file cabinets, drawers, enclosed areas, etc.) do not contain any confidential information and was inspected for hazardous materials.

EMAIL TO: Property Management baelp-asset.accounting@ttuhsc.edu