



**TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER EL PASO**  
**Interagency Property Transfer Request**

Transferor Agency: \_\_\_\_\_ Agency Number: \_\_\_\_\_

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

**Computer Equipment Certification:**

Service Tag #: \_\_\_\_\_ Hard Drive Removed: \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ N/A

**Hazardous Certification:**

I certify that the item has been checked and determined to be free of hazardous material.  
\*Attach Decontamination Form (HSCEP OP 75.05, Attachment A) if applicable.

Date Checked: \_\_\_\_\_ By: \_\_\_\_\_ Signature: \_\_\_\_\_

**Confidential Information Certification:**

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

Date Checked: \_\_\_\_\_ By: \_\_\_\_\_ Signature: \_\_\_\_\_

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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. **COMPUTER CERTIFICATION** - Enter the service tag number and indicate whether or not the hard drive has been removed.
15. **HAZARDOUS CERTIFICATION** - If appropriate, enter the date the item was inspected for hazardous materials and the name of the person performing the inspection.
16. **CONFIDENTIALITY CERTIFICATION** - Signature of person verifying all storage areas (i.e. file cabinets, drawers, enclosed areas, etc.) do not contain any confidential information. Certification must be completed by IT Security if device is computer related.

EMAIL TO: Property Management [baelp-asset.accounting@ttuhsc.edu](mailto:baelp-asset.accounting@ttuhsc.edu)