



**Capital Equipment Relocation Form
For Equipment Items Costing \$5,000 or More**

This form is to be used to notify the Asset Management Office whenever there is a permanent change in the location of a decaled equipment item or whenever an equipment item is lost, stolen, traded-in, scrapped, or transferred to another institution of UNC-CH department.

Transferring from Department Name: _____ Dept. or Function Number: _____

UNC-CH Bar Code or Decal I.D. No. _____

Brief Description of Item _____

Old Location Building: _____ Room: _____

New Location Building: _____ Room: _____

Date of Disposition or Transfer _____

Disposition:

- Cannot Locate
- Stolen - attach copy of police report Date reported to UNC-CH Security _____

| | | | |
|----------------------------|---------------------------------------------|----------------|-----------------------|
| <input type="checkbox"/> ☆ | Traded-in for: | Desc. _____ | To: Vendor _____ |
| | | Req. No. _____ | P.O. No. _____ |
| | Bar Code or Decal # on Item Traded-in _____ | | Amount Rec'd \$ _____ |

- ☆ **Scrapped for Parts EQUIPMENT MUST NOT BE DISCARDED (send remains to surplus)**
Remove bar code decal and attach to this form.

- Transfer From Your Department To:**
Another UNC-CH Department Receiving Dept. Name _____
(Do Not Remove Bar Code or Decal) Function Number _____
Name of Person Receiving _____

Signature of Person Receiving _____

| | | |
|------------------------------------------------------------------------------------------|---------------------------------------------|-------------------------------------|
| <input type="checkbox"/> ☆ | Another Institution - Remove Bar Code/Decal | Name of Receiving Institution _____ |
| PRIOR UNIVERSITY APPROVAL REQUIRED FOR ALL TRANSFERS TO OTHER INSTITUTIONS | | |
| See Finance Division Bus.Manual, Capital Assets Proc.602.3 Transferring Equipment | | |

☆ **BAR CODE OR DECAL MUST BE REMOVED AND AFFIXED TO THIS FORM (for shaded items only)**

Remarks:

Certified By _____

Reproduce form as deemed necessary

Date _____

**Mail To: Asset Management
CB# 1070 AOB, Airport Drive**