

STATE UNIVERSITY OF NEW YORK AT PURCHASE
PROPERTY CONTROL SYSTEM
REQUEST FOR EQUIPMENT DISPOSAL/SURPLUS

The following equipment item is no longer needed:

Item _____

SUNY Asset Number _____

Manufacturer _____

Model _____

Serial Number _____

Location _____
Building _____ Room Number _____ Floor _____

Condition (Circle one) Excellent Good Fair Poor Other _____

REASON FOR DISPOSAL/SURPLUS _____

Originator Signature _____

Name and Title Printed/Typed _____

Department _____

Date _____

Department Head Signature _____

Date _____

All fields must be completed for processing.

DISPOSAL OF EQUIPMENT CAN BE MADE ONLY UPON PROPERTY CONTROL OFFICE AUTHORIZATION.