



TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER EL PASO
DELETION/TRADE-IN OF AN INVENTORIED ITEM
 (For Unserviceable, or Trade-In Equipment)

Department:	Orgn Code:	Date:
--------------------	-------------------	--------------

To: **PROPERTY MANAGER**

I request that the item(s) below be removed from the inventory of this department.

Inventory #:	Item Description:
Inventory Carrying Value:	
I have personally examined the item(s) and request this change for the following reason:	
Disposition Suggested:	
If Trade-In, include the following:	
Purchase Order #:	New Equipment tag#:

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 Signature: _____ Date: _____

TO BE COMPLETED BY PROPERTY INVENTORY
SIGNATURE: _____ DATE: _____