

CHANGE IN ACCOUNTABILITY FORM

(Note: A separate form is to be completed for each equipment item.)

Date Submitted: _____

Federal/externally funded equipment: YES NO

TTU Property Tag No. _____

Reason for Change:

Change of Location

Existing Location (Bldg./Room #): _____

New Location (Bldg./Room #): _____

Trade In

Purchase Order Number for New Equipment _____

Transfer to Another Administrative Unit

New Department: _____

New Index/Org: _____

New Location: _____

Return to Grantor

Request to Surplus

Check if already sent to Surplus

Missing

An officer's report from University Police is required for missing or stolen items.

Other— Please specify: _____

Approvals:

Department Head: _____ Date: _____

If transferring to another administrative unit, the department accepting the transferred equipment must sign below.

Dean/Administrative Officer: _____ Date: _____

For Business Services Use Only

Property Officer: _____ Date: _____