

EQUIPMENT TRANSFER REQUEST FORM INSTRUCTIONS

Departmental Information (Section 1):

Contact Person: Enter the name of the person who can be contacted to obtain further information. Please also provide the contact person's phone number, e-mail address, and mail code on the appropriate lines.

From Unit: Enter the name of the SIU unit to which the equipment has been assigned and the unit number (user segment, if applicable). After the form has been completed, the unit officer should sign and date each page of the form to indicate his/her approval.

To Unit: Enter the name of the SIU unit to which the equipment will be transferred and the unit number (user segment, if applicable). After the form has been completed, the unit officer should sign and date each page of the form to indicate his/her approval.

Equipment Information (Section 2):

Inventory Tag No. Enter the tag number of equipment item(s).

Description of Item(s) Enter a brief description of the equipment item(s).

Acquisition Date Enter the date that the equipment item(s) was purchased.
(Format: DD Mmm YYYY)

Inventory Value Enter the historical cost of the equipment item(s).

Pickup Location Enter the building number and room number from where equipment item(s) will be moved.

Delivery Location Enter the receiving department's building number and room number where equipment item(s) will be located.

Administrative Approvals (Section 3): (If Required) .

Please have Dean or Director sign and date form to indicate his/her approval if required. Approval by Dean or Director is required by the Fixed Assets Department only if equipment is being transferred to another Illinois state agency.