

Coastal Protection & Restoration Authority

SURPLUS FORM

IT IS REQUESTED THAT THE FOLLOWING EQUIPMENT BE SURPLUSUED:

DESCRIPTION	TAG #	SERIAL #	CONDITION	Asset #

Signature, Property Liaison

Date

REVIEWED AND RECORDED FOR PROPERTY INVENTORY:

PROPERTY CONTROL MANAGER

Date

This form is to be submitted to the Property Control Manager, who will initiate the physical removal of the equipment upon receipt of the approved documents from the Division of Administration. Under no circumstances should the property be moved from its present location without specific instructions from the Property Control Manager. Please indicate condition of property as follows: Good, Fair, Poor, Inoperative, Parts Missing, etc.