



UNIVERSITY of NORTH CAROLINA  
**ASHEVILLE**  
Fixed Assets- Controllers Office  
Equipment Transfer Form

**THIS FORM IS TO BE USED WHEN EQUIPMENT IS MOVED, SOLD, STOLEN, ETC.**

Date of Request: \_\_\_\_\_ Equipment Tag # (Blue Property Tag): \_\_\_\_\_

Item Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current Location (building, room, etc.):  
\_\_\_\_\_

New Location (building, room, etc):  
\_\_\_\_\_

Will transfer be permanent (over 90 days)?     YES     NO

If temporary, for how long? \_\_\_\_\_

Signature of person formerly responsible for item  
\_\_\_\_\_

Signature of person newly responsible for item  
\_\_\_\_\_

Item was (Check One):

Lost     Traded     Stolen     Transferred to     Scrapped

Other (Please explain in remarks)

Remarks:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date received by Fixed Asset Officer:  
\_\_\_\_\_