

**University of North Texas Health Science Center at Fort Worth**  
**Request for Authority to Remove Equipment or Other Property From Inventory**  
**Cannibalization/Obsolete/Unserviceable/Damaged**

Department ID/Name

To: Property Control

I request that the asset(s) listed below be removed from the inventory of this department:

**Asset Number**

**Description**

**Serial Number**

**Inventory Value**

**Other Related Assets**

<b>Asset Number</b>	<b>Description</b>	<b>Serial Number</b>	<b>Inventory Value</b>

I have personally examined the asset(s) and request the deletion for the following reasons:

(Place an X for the appropriate reason)

Parts	<input type="checkbox"/>
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Salvage	<input type="checkbox"/>
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Trash	<input type="checkbox"/>
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Estimated value of parts dismantled

\_\_\_\_\_  
Personnel Requesting Disposal

\_\_\_\_\_  
Date

It is my opinion that no student, employee, or other person should be required to reimburse the State for the value of this item.

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
Property Manager

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

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**Instructions**

1. Enter the Department ID and name.
2. Enter the asset number on the tag of the asset.
3. Enter the description for the asset.
4. Enter the serial number for the asset.
5. Enter the historical value for the asset.
6. Enter any other asset(s) being disposed related to asset disposal request.
7. Select the appropriate disposal request.
8. Enter an estimated value of parts removed from the asset.
9. Obtain the signature from the person requesting the disposal.
10. Obtain the signature of the department head accountable for the asset.
11. Submit the original form to Property Control
12. Distribution:  
Original: Property Control files  
Copies: Department files