



Asset Maintenance Form

(Please send completed form to Property Control, Thompson's University Center)

Transfer of Equipment

Inventory Number	Transfer From		Transfer To			
	Orgn code	Locn - Bldg/Room	Orgn code	Locn - Bldg/Room	User	Contact name/phone #

New Equipment

	New Item 1	New Item 2	New Item 3
Asset Tag Number (if applicable)			
Date Received			
Description			
Orgn Code			
Location- Bldg/Room			
Manufacturer			
Model			
Serial Number			
User (if applicable)			

Notes

Requestor			
Name	Department	Phone number	Date