OLD DOMINION UNIVERSITY RESEARCH FOUNDATION

Property Control

Equipment Turn In / Transfer Request Form

This form is used to update department inventories by removing, adding, or updating items within departmental responsibility.

PLEASE RETURN FORM TO ODURF

INITIATING Dept._____ Phone #: _____

Purchase Order #: _____ Project / Object Code: _____

Contact Person: _____ Date: _____

RECEIVING Dept._____

Budget Code: _____ Phone #:_____

Contact Person: _____ Date:_____

I wish to declare the following items be: *(must check one)*

☐ Turned into Property Control ☐ Transferred to another location / department

☐ Lost ☐ Stolen ☐ Other

Items	Tag #	Serial #	Model / Mfg	Condition

Condition: New, Good, Fair, Poor, Scrap

I hereby certify that the above is a true and complete statement regarding this request.

_____ _____

Initiating Contact Person Initiating Director, Supervisor (Principal Investigator)

_____ _____

Receiving Contact Person Property Control Supervisor Date