

**SECTION A** 

## SOUTH ORANGE COUNTY COMMUNITY COLLEGE DISTRICT PROPERTY TRANSFER REQUEST LOST/STOLEN/DESTROYED FIXED ASSETS

## **INSTRUCTIONS:**

For Lost/Stolen/Destroyed Assets, complete Section A, and obtain all necessary signatures. Forward copies of signed, completed form to District Risk Management.

For Property Transfer Request, complete Sections A and B, and obtain all necessary signatures. **Please note:** All Property Transfer requests must have three different signatures, including one from the Department Requestor, Authorized Department Administrator/Director, and Fixed Asset recipient, or Warehouse Supervisor/Designee. Forward a copy of completed, signed, and dated form to District Purchasing. If assistance is required to move property, FAX copy to Campus Facilities, Maintenance & Operations, after approval of transfer.

ATEP	☐ DISTRICT	☐ IVC	SA	DDLEBACK	
Date:	Requested By/ Dept./Phone Ext.:	SOCCCD/Saddleback/IVC Tag ID#, if Known:			
Description of Pro	pperty Item(s) – Include Brand Name/Model	/Serial#, if Known:			
Is this a:	Lost/Stolen/Destroyed Fixed Asset Property Transfer				
SECTION B					
If Property Trans	fer, is Transfer: Temporary Permanent				
To Designated:	On-Campus Location (ATEP, District, I	Return		or Temporary Transfer, Expected eturn Date is:	
Move From:	Campus:		Dept/Bldg:	Room:	
	Campus:		Dept/Bldg:	Room:	
Move To:	Off-Campus Address, if Applicable – Includ items that will be transferred to a location				
1. APPROVED BY (SI	I 	DAT			
2. PROPERTY RELEASED BY (SIGNATURE)			DATE		
3. PROPERTY MOVED BY (SIGNATURE)		DAT	DATE		
4. PROPERTY RECEIVED BY (SIGNATURE)		DAT	DATE		
5. RETURN OF TEMPORARY TRANSFER ACKNOWLEDGED (SIGNATURE)		RE) DAT	DATE		