

PROPERTY MANAGEMENT ADDITIONS REQUEST FORM

SEE THE REVERSE SIDE OF THIS FORM FOR INSTRUCTIONS.

Send Completed Forms To:
Property Management

Department Name: _____

Contact Person: _____ **Phone #** _____

For multiple additions, please attach a listing providing the requested information:					
1	KCC Tag#	Code*	Description	Serial Number	Model *
	Cost Center *	Dept.	Sponsored Program Award # And Project Title	Sponsored Agency	Amount
	Location (Bldg. & Rm)			Custodian (Person Responsible)	
2	KCC Tag#	Code*	Description	Serial Number	Model *
	Cost Center *	Dept.	Sponsored Program Award # And Project Title	Sponsored Agency	Amount
	Location (Bldg. & Rm)			Custodian (Person Responsible)	

Please select from the following addition codes to identify the source of the equipment.

*Addition Codes:

- 1) Equipment received from Surplus Store.
- 2) Equipment found in department during equipment inventory audit.
- 3) Equipment brought to campus by new faculty member, (attach copies of correspondence/forms).
- 4) Equipment is a "gift" from Corporate or Individual donor(s), (attach copies of correspondence/forms).
- 5) Equipment received from outside source (Federal or State Agency), (attach correspondence/forms).
- 6) Other (please specify): _____

<p>Office Use Only: For Inventory Audit _____ Completed by _____</p>	<p>Date Entered _____ File Number _____</p>
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