

NEW JERSEY INSTITUTE OF TECHNOLOGY
SURPLUS PROPERTY DISPOSAL FORM

DATE: _____

This form must be typed or written in ink. A separate form must be completed for each item or lot to be disposed of. Items such as chairs, tables, desks, miscellaneous office supplies, etc. may be grouped as one lot. Email completed forms to General Accounting Office at propertycontrol@njit.edu. If you have any questions regarding surplus property disposal, please call at ext. 7737 or email to propertycontrol@njit.edu.

TO BE COMPLETED BY DEPARTMENT

DESCRIPTION: _____ Purchase Order # if known _____

NJIT BAR CODE NUMBER (if known): _____

MANUFACTURER: _____ MODEL: _____ QUANTITY: _____

CONDITION: NEW ☐ GOOD ☐ FAIR ☐ POOR ☐ NEEDS REPAIR ☐ PARTS MISSING ☐

DEPARTMENT NAME: _____

BANNER INDEX # (If known): _____

LOCATION OF ITEM: BLDG/RM _____

PERSON TO SEE FOR PICKUP: _____ PHONE: _____

DEPARTMENT HEAD/PRINCIPAL INVESTIGATOR: (PLEASE PRINT) _____

SIGNATURE: _____ DATE: _____

GENERAL ACCOUNTING USE ONLY

Funding Source: Grant Funds: ☐ University Funds: ☐

(If Grant Funded) Approval By Office Of Research: Yes ☐ No ☐

Date of Fixed Asset System write-off: _____

SURPLUS PROPERTY PICKUP INFORMATION
(To be completed by Department of Facilities upon pickup)

Item Disposition: Picked up: ☐

Facilities Department signature to verify that the information above is accurate to ensure proper disposition of equipment.

Name (please print): _____ Signature: _____ Date _____