

# REQUEST FOR DISPOSAL OF SURPLUS PROPERTY

Please enter one **CODE** per item: **(S1)** Obsolete **(S2)** Too Costly **(S3)** Beyond Repair **(S4)** Cannibalized

Code	UNM Tag #	Manufacturer	Model #	Serial #	Description	Surplus Property Use Only	Auction
1							<input type="checkbox"/>
2							<input type="checkbox"/>
3							<input type="checkbox"/>
4							<input type="checkbox"/>
5							<input type="checkbox"/>
6							<input type="checkbox"/>
7							<input type="checkbox"/>
8							<input type="checkbox"/>
9							<input type="checkbox"/>
10							<input type="checkbox"/>

Pick up items at Building #: \_\_\_\_\_ Building Name: \_\_\_\_\_ Room #: \_\_\_\_\_ Phone: \_\_\_\_\_

Items will be delivered to Surplus Property. Date: \_\_\_\_\_ Time: \_\_\_\_\_ By: \_\_\_\_\_

**For Department Requesting Disposal of Surplus Property:**

Date: \_\_\_\_\_ Org Code: \_\_\_\_\_  
 Department Name: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 PRINT NAME & TITLE (authorized by):  
 \_\_\_\_\_

Additional Information: \_\_\_\_\_

***For Surplus Property Use ONLY***

Received by Surplus Property  
 Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Surplus Signature: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Released By:  
 \_\_\_\_\_  
 Sign Name \_\_\_\_\_ Print Name \_\_\_\_\_

**Type directly into this interactive PDF form and email completed form to [univserv@unm.edu](mailto:univserv@unm.edu)**

\*Call Surplus Property at 277-2923 with questions\*  
 Receipts will **only** be available at the time of the pick-up or drop-off