



University Services

# 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