



Office of the University Controller
 Florida State University
 6300A University Center
 Tallahassee, FL 32306-2393
 (850) 644-9756
PAS-PropertyForms@fsu.edu

PROPERTY CHANGE FORM

Control # (Prop Svcs Use Only)

Please complete the following section to assist Property Services in scheduling transport of items:

A. Please move items listed no later than: _____

B. Department will move items - no assistance required. Remove and approve transfer.

C. Items already moved or ownership Department change only (update records).

Required Environmental Health & Safety (EH&S) Certification (FORM WILL NOT BE PROCESSED UNLESS COMPLETED):

Dept Contact: _____	Phone #: _____
Dept Name: _____	
Dept ID: _____	Fund Code: _____
Project ID: _____	Date: _____

Note: If the property item being transferred is a computer or other device containing a hard drive, a data cleansing (also referred to as scrubbing) is required before the transfer request will be approved. Property Services will not remove the computer unless the Scrub Initials section of the table below has been filled in for each computer listed. Additionally, before Surplus Property personnel will pick up a computer a "Computer Scrubbed" sticker must be affixed to it. See [Property Frequently Asked Questions](#) for additional information.

Purpose of Transfer:				Department Transferring From:			Department Receiving To:			
Special Instructions:				DeptID:	Fund:	DeptID:	Fund:			
Property Description	Serial #	Tag #	Capital Asset?	Building Abbreviation	Room #	Project ID	Building Abbreviation	Room #	Project ID	Scrub Initials
			<input type="checkbox"/>							
			<input type="checkbox"/>							
			<input type="checkbox"/>							
			<input type="checkbox"/>							
			<input type="checkbox"/>							

If additional lines are needed please use the [PROPERTY CHANGE FORM ADDENDUM \(PC 213a\)](#)

Sponsored Research Approval (Required for Funds 520-570; email form to SRASProperty@fsu.edu):

_____ **If capital Federal property, indicate title:** FSU - Conditional FSU - Unconditional Sponsoring Agency

Person Responsible for Physically Moving Property
 I hereby acknowledge receipt of the above listed items to be relocated as outlined in the Receiving (To) column (transferor gets one copy):

Transferring (Out) Department Property Manager
 I hereby authorize the above actions for the property listed on this form and certify that if property is being transferred to Surplus, it is obsolete, uneconomical / inefficient, and/or serves no useful purpose to this department:

Transferring (In) Department Point of Contact
 I hereby acknowledge the receipt of the property listed, from mover:

