

CAPITAL PROPERTY ACCOUNTABILITY RELEASE FORM

Reference: <u>4-OP-D-2-F</u>

| | <u>For</u> | Controller's Offi | ce Use Only | | | |
|---|--|----------------------|--------------------------|--------------------------|------------------|--|
| Control # | | | Release of Accou | ntability is: |] Approved | Not Approved |
| approvals have been granted, the de | e department to be released from acco epartment Property Manager may coor of attached to any Facilities work ord | rdinate the physical | disposal of capital item | is through <u>Facili</u> | ties. An approve | d Capital Property |
| Required Environmental Health & Safety (EH&S) Certification | | | | | | |
| Date Requested: | Dept ID: | Phone: | | Contact: | | |
| Tag# | Description | | Disposition Method | | Project | Net Book Value (NBV) *Controller's Office |
| | | | | | | |
| | | | | | | |

If additional lines are needed please use the <u>Property Accountability Release Form Addendum</u> * A police report is required for this Distribution Method.

**An Inventory Shortage Form is required for this Disposition Method; complete Sections 2 and 3.

Section 1 - PROVIDE THE REASONS OR CIRCUMSTANCES FOR THIS REQUEST

Note: Provide justification and documentation as required for this request per Property Policy 4-OP-D-2-F, Section I. Dispositions.

Section 2 - DESCRIBE ACTIONS TAKEN TO LOCATE THE ITEM(S) OR RECOVER COSTS (required for Disposition Methods G-I)

Note: If the Disposition Method is Missing or Stolen, please include the date the item was last seen and dates of all subsequent searches.

Section 3 - DESCRIBE PROCEDURES TO CONTROL ITEMS AND PREVENT FUTURE LOSSES (required for Disposition Methods G-I)

| Section 4 - CERTIFICATION (required for all Disposition Methods) |
|---|
| I certify the above sections are true and complete to the best of my knowledge and request, with the exception of "missing" items, a release of |
| accountability be given for the property listed. I certify the property missing was not accounted for and every effort was made to locate it. Our |

accountability be given for the property listed. I certify the property missing was not accounted for and every effort was made to locate it. Our department will continue to try to locate any missing items and will notify the Controller's Office if they are located. I further certify that if property is being scrapped or disposed as surplus, it is obsolete, uneconomical / inefficient, and/or serves no useful purpose to this department.

PROPERTY MANAGER SIGNATURE

SPONSORED RESEARCH ADMINISTRATION SIGNATURE (Required for Funds 520-570; email form to <u>SRA-Approvals@fsu.edu</u>)

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If C&G-funded property, indicate title:

CONTROLLER'S OFFICE SIGNATURE

○ FSU - Conditional
○ FSU - Unconditional

nal 🔿 Sponsoring Agency

**This AR form is no longer applicable for trade-ins. Please use the Trade-In Accountability Release Form for all trade-in items. **