

Accounting & Property Services 6300A University Center Tallahassee, FL 32306-2393 (850) 644-9758 CTL-AssetManagement@fsu.edu

FSU - Unconditional Sponsoring Agency

CAPITAL PROPERTY CHANGE FORM

						Control # (Asset Mgmt Use Only)		
Dept Contact:	Phone #:	De	ept ID:	Fund Code:	Pro	oject ID:	D	ate:
Note 1: This form is required to accour coordinated by departmental Property Accountability Release Form. Note 2: For assistance with the physica	Managers and DO NOT need	l to run through Accou	unting & Propert	y Services. Fo	cles. Transfers or "transfers" o	of all other prop f property to Su	perty items ca rplus, please	an be approved a complete the
lote 3: Please verify that your building 1. Go to http://www.facilities.fi 2. Click on the Building Inform 3. Click on your building, this was correct room number (will be either you cannot find your information in the pace" link.	su.edu/space lation Portal and use the Sear will give you the Building Prof er 4 or 6 digits).	ch field to find your b ile where you will find	uilding the building nu	mber (4 digits	s), then select R	Room Info (FSU l	login required	-
Purpose of Transfer:			Department Transferring From:			Department Receiving To:		
Special Instructions:			DeptID: Fund		Fund:	DeptID: Fund:		Fund:
	Serial #	Tag #	Building #	Room #	Project ID	Building #	Room #	Project ID
Property Description								
Property Description								
Property Description								
Property Description								
Property Description								
Property Description								
Property Description								
Property Description	If additional lines are		he PROPERTY C	HANGE FOR	M ADDENDUM			
ransferring (Out) Department Pro	operty Manager		he <u>PROPERTY</u> C	Trai	nsferring (In)	Department F		
Property Description Fransferring (Out) Department Property authorize the above changes for the property of t	operty Manager		he <u>PROPERTY C</u>	Trai	nsferring (In)	Department F		

If C&G funded property, indicate title: FSU - Conditional