University of Missouri

Property Inventory and Change Report

☐ UM System ☐ Columbia ☐ Kansas City ☐ Rolla ☐ St. Louis ☐ Extension

UM Health care
☐ UH
☐ Clinics
☐ Corporate
☐ CRH
☐ MRC
☐ EF

Date: 1/1/2006
Department Name: _____
Department contact: _____
Phone # _____

MoCode ☐ PS Account Number ☐ DeptID ☐

Item transferring to Surplus (vehicles below)							
Item description	**Working**				**Inventory #**	**Item location**
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
	☐	Yes	☐	No		
Has electronic data been erased?					☐ Yes	☐ No

Vehicle and trailer Information

Year: _____ Make: _____ Model: _____
Mileage: _____ VIN: _____ Cylinders: _____
Transmission: ☐ Manual ☐ Automatic
Color: _____ Current location: _____
License plate # _____ ☐ If additional vehicles

Condition:
☐ Good condition inspected
☐ Good condition not inspected
☐ Not running
☐ Running with mechanical problems

Desired Action

Sell at on-site auction ☐ Sell at on-line auction ☐ Sell at Surplus decision ☐

Originating Department Signature _____ Phone _____

Receiving Department Signature _____ Phone _____

UM 27 (August 06)

Contact Environmental Health & Safety if items might contain hazardous materials.
If items have inventory tags contact Inventory Control.