

PROPERTY DISPOSITION REPORT

TO: NEVADA STATE PURCHASING DIVISION
 PROPERTY MANAGEMENT PROGRAM
 515 E MUSSER ST, STE 300
 CARSON CITY, NV 89701
 PH: (775) 684-0192 FAX: (775) 684-0188
 Email completed forms to: sp@admin.nv.gov

FROM: Agency Name: _____
 Contact Name: _____
 Phone: _____ Fax _____
 Property address: _____

DISPOSITION OF PROPERTY IS EXCESS, BEYOND REPAIR, LOST/STOLEN OR TRANSFERRED/DONATED

A separate report for each disposition action must be completed. Must provide a complete description of property including condition, State I.D. # (if applicable) and budget account from which the property was originally purchased. **Agency must obtain disposition approval from Nevada State Purchasing Property Management before agency may proceed with disposition.**

- EXCESS** to the needs of this department; request pickup by State Purchasing. Point of contact and telephone number must be provided above.
- BEYOND REPAIR: MUST PROVIDE DETAILED EXPLANATION AS TO CONDITION TO RECOMMEND PROPERTY TO BE JUNKED.** Removal of property is at agencies expense; or contact Buildings and Grounds. Remove State ID# tag and any State emblems before disposal.
- LOST/MISSING/STOLEN:** The agency head must be notified immediately of lost/missing/stolen items. Please attach a police report or other documentation to describe circumstances. Agency must process a FC document in Advantage noting date of Lost/Missing item(s). Item(s) must remain on agency's inventory for two inventory cycles prior to processing PDR and item(s) being removed.
- DONATION:** Please provide explanation of property condition, name of organization, and proof of organization's tax-exempt status. Agency must obtain a receipt signature from organization receiving property. **AGENCY MUST HAVE PRIOR AUTHORIZATION BEFORE DONATING PROPERTY.** Remove State ID# tag and any State emblems before donating.

Name of Organization for Donation: _____

- STATE I.D. TAG REQUEST:** Duplicate _____ New _____ (Unit Cost ≥ \$5,000)
 If NEW, please provide the agency account coding, cost and backup documents approving the direct purchase; including a copy of the invoice and payment voucher.
 FUND _____ AGENCY _____ ORG _____ ACTIVITY _____ OBJECT _____ APPR UNIT _____
 LOC CODE _____ UNIT COST \$ _____
- TRANSFER:** Transfers between State agencies only; process FC document for Purchasing approval in ADVANTAGE. Maintain PDR for agency records. FROM Location: _____ TO Location: _____
 Signature of Receiving Agency _____ Date _____
- OTHER:** Please provide detailed explanation.

REMINDER: REMOVE ALL TAGS PRIOR TO DONATION OR DISPOSAL.

FA Type (E, U or X)	STATE ID #	DETAILED DESCRIPTION AND CONDITION OF PROPERTY	OFFICE USE ONLY	
			FC or FD Doc	Warehouse #

Signature of Person completing this form	Print Name and Title	Date
Signature of Agency Approving Authority	Print Name and Title	Date