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| Department of Executive ServicesFleet Services Division | **CHECK ONE BOX ONLY:****[ ]  DISMANTLE/PART OUT****[ ]  DISCARD [ ]  TRADE-IN****[ ]  RECYCLE**   |

**PERSONAL PROPERTY DISPOSITION FORM**

**NOTE: A separate form must be completed for each different method of disposal. *Trade-In* items must have a copy of the Receiving Vendor’s Invoice listing credit amount.**

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| --- | --- | --- |
| **KING COUNTY****ASSET NUMBER** | **SERIAL NUMBER** | **DESCRIPTION** |
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Custodial Agency

Name:

 Signature of Inventory Contact Date

Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Printed Name Phone

**APPROVED BY:**

 **\_\_\_\_\_\_**

Agency Manager’s Signature Printed name Date

|  |
| --- |
|  |

For Personal Property Use Only: FIXED ASSETS ENTRY DATE \_\_\_\_/\_\_\_/\_\_\_\_ ENTERED BY: \_\_\_\_\_\_\_\_\_\_