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| Department of Executive Services  Fleet 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

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| --- |
|  |

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